



VASCULAR &
INTERVENTIONAL
SPECIALISTS

A DIVISION OF CHARLOTTE RADIOLOGY

Schedule your appointment with Charlotte Radiology.

Our Interventional Radiologists are experts in vascular care, able to treat BPH and a variety of other conditions through minimally invasive procedures. To schedule a screening and consultation with an interventional radiologist, please call **704.358.IRMD**.

Locations

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PROSTATIC ARTERY EMBOLIZATION

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Prostatic Artery Embolization (PAE)

Prostatic Artery Embolization (PAE) is a minimally invasive procedure used to treat enlarged prostates, a condition also known as benign prostatic hyperplasia (BPH). BPH is the most common noncancerous tumor found in men, affecting roughly 19 million men in the United States. As the prostate becomes enlarged, it presses on the urethra and causes lower urinary tract symptoms (LUTS) that may include:

- urinary incontinence
- pain when urinating
- increased urinary frequency, especially at night
- increased urinary urgency
- bleeding from the prostate
- straining to urinate or weak urine stream
- incomplete emptying of the bladder
- intermittency

PAE is safe and effective, offering a shorter recovery and fewer complications than traditional surgery.

Who is likely to have BPH?

BPH affects more and more men as they age. It is estimated that approximately 50% of men in their 50s and as many as 90% in their 70s and 80s experience symptoms from an enlarged prostate. Until recently, BPH could only be treated with traditional surgery, which often came with a list of complications including sexual dysfunction and impotence. For this reason, many men who are diagnosed with BPH refuse treatment. Fortunately, PAE now offers a nonsurgical alternative to treat the lower urinary tract symptoms associated with BPH.

Diagnosis & Treatment

A physician's referral is not required to schedule a new patient appointment. For BPH diagnosis, patients generally undergo a urine flow and dynamics test and a digital rectal exam, which helps assess the size of the prostate. In some cases, a prostate-specific antigen (PSA) test is done to help rule out prostate cancer. Imaging like MRI, CTA or ultrasound are often performed to provide physicians with a visual of the prostate gland.

Patients who are diagnosed with BPH and are ineligible or not interested in traditional surgery could be candidates for the PAE procedure. An interventional radiologist will determine whether PAE could be right for you.

Preparing for PAE

PAE is an outpatient procedure that takes about two hours to complete. It's performed by an interventional radiologist, who uses image guidance to perform the procedure. During PAE, a catheter will be threaded through a tiny puncture in the wrist or groin to access blood vessels on both sides of the enlarged prostate gland. The radiologist then uses small beads to block the blood flow to the prostate, which causes the prostate to shrink and relieves or improves symptoms, usually within days to weeks of the procedure. And unlike surgery, PAE requires only moderate or local anesthesia, and patients can return home the same day.

Successes & Risks

PAE is a successful treatment for thousands of men, with at least 80% reporting significant improvement of symptoms. As with any medical procedure, there are risks involved, but with PAE, the risks are very mild. These can include blood in the urine, semen, or stool; leakage of blood in the puncture site; bladder spasm; or infection of the puncture site or prostate. These potential complications will either resolve on their own or can be treated with a short course of medication.

