Aquablation with the HYDROS robot

Waterjet surgery for an enlarged prostate

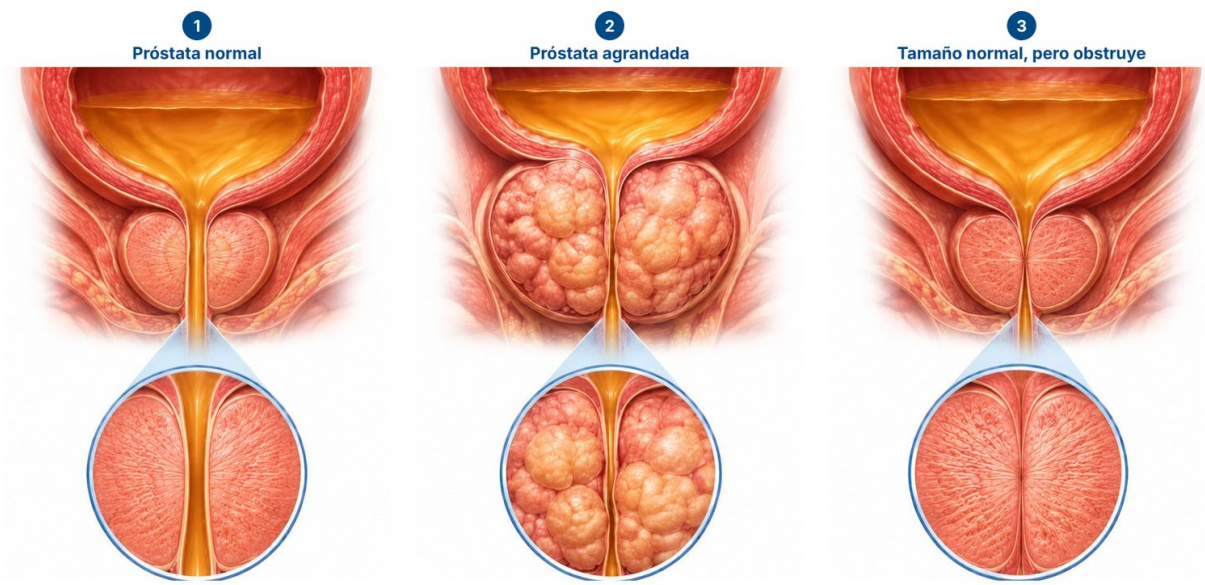
HOSPITAL STAY	CATHETER	NO HEAT	EJACULATION
1 or 2 nights	**1 or 2 days**	**robot-guided waterjet**	**preserved in almost 9 out of 10**

What is it for?

With age, the prostate tends to grow. This growth is NOT caused by cancer; it is normal and is called **benign prostatic hyperplasia**. But it can squeeze the urethra, the tube that carries urine out, and that is when symptoms appear. Sometimes the prostate is a normal size but still blocks the flow of urine. The most common symptoms are:

- It is hard to start passing urine, and the stream is weak or stops and starts.
- You have to get up several times at night to pass urine.
- You feel a sudden urge to pass urine.
- You feel that your bladder has not emptied completely.

Aquablation removes the part of the prostate that is blocking the urethra, so that urine can flow easily again.



La orina sale con facilidad por una uretra libre; si la próstata la comprime, cuesta orinar

Any questions? We are here to help

Appointments **+34 944 393 510** · WhatsApp **+34 688 873 045** · gestion@urologiaclinica.biz

Information about the HYDROS robot: +34 688 681 019

Urología Clínica · Hospital Universitario IMQ Zorrotzaurre

Ballets Olaeta 4, 3rd floor · 48014 Bilbao · urologiaclinica.biz

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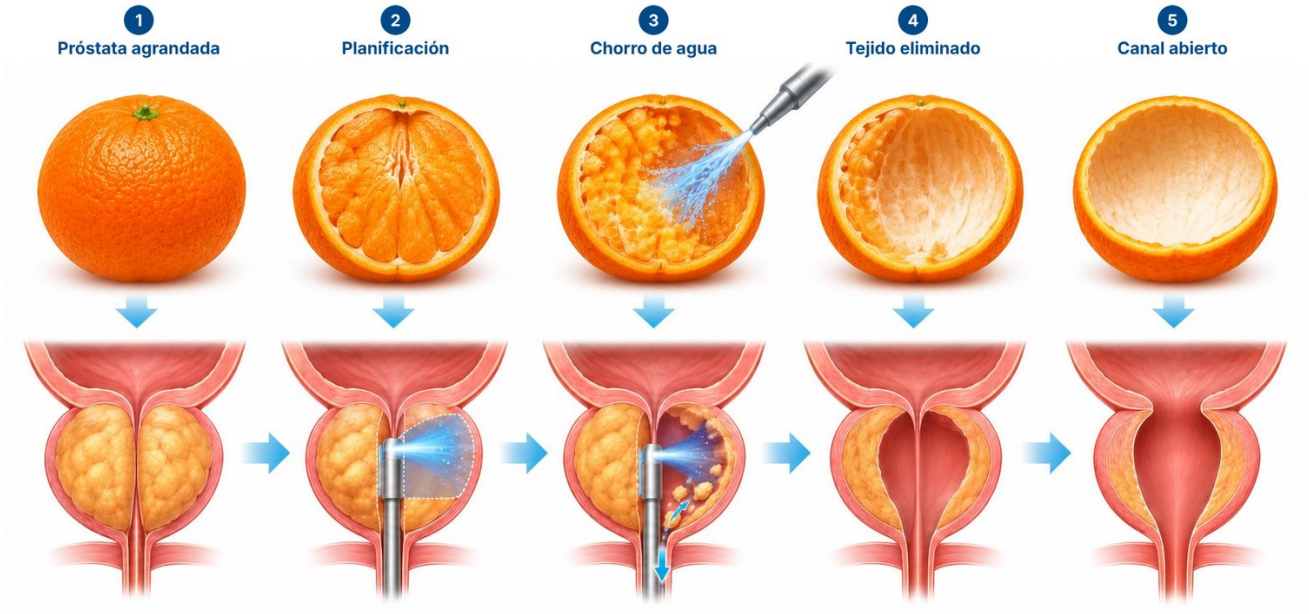
What does it involve?

It is a technique with **no cuts in the skin**: it is done through the urethra. It removes the obstructing tissue with a **high-pressure waterjet**, directed by a robot with the help of artificial intelligence. **It uses no heat**. It is done in two steps:

1. **Planning.** The surgeon sees the whole prostate with ultrasound and an internal camera, and marks exactly which area needs to be removed. The areas that control continence and ejaculation are not affected.
2. **Treatment.** The HYDROS robot directs the waterjet and removes only the marked tissue, with great precision.



Como vaciar una mandarina con agua: el robot HYDROS elimina solo el tejido marcado y respeta la cápsula

Who is it for?

- Men with moderate or severe urinary symptoms caused by the obstruction.
- When medication has not worked well enough or is not well tolerated.
- For those who want an effective treatment with the lowest possible risk to ejaculation.
- It works well in medium-sized prostates. In extremely large ones, your urologist will assess whether it is the best option.

Advantages

- ✓ Lasting relief of urinary symptoms.
- ✓ Low risk of urine leakage and sexual problems.
- ✓ Most patients (around 9 out of 10) keep their ejaculation.
- ✓ High precision thanks to robotic assistance.
- ✓ Quick recovery.

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Hospital stay and recovery

- You will stay in hospital for one or two nights.
- You will have a catheter in your bladder for one or two days. Most patients go home without a catheter.
- For a few days you may notice burning or an urgent need to pass urine. This is temporary.
- You may see some blood in your urine in the first few days. Drinking plenty of fluids helps to reduce it.
- Your urologist will tell you when you can resume strenuous activity and sexual intercourse.

Risks

Like any operation, it can have risks. They are uncommon, and the most frequent are:

- **Bleeding and urine infection.** Bleeding is low, slightly higher than with HoLEP.
- **Permanent urine leakage.** The risk is very low, because the area next to the urinary sphincter is preserved.
- **Changes in ejaculation.** These are uncommon: around 9 out of 10 patients keep their ejaculation.

Insurance cover

It is a new technique and is not yet covered by insurance companies. We will inform you about your case before the operation.

When to call us

Call us on **+34 944 393 510** or go to the hospital Emergency Department if you have:

- A fever above 38 °C.
- Heavy bleeding or clots in your urine that do not improve with drinking fluids.
- You cannot pass urine, or the catheter stops draining.

This leaflet summarises general information about the technique. It does not replace your urologist's explanation or the informed consent form, which we will give you before the operation.

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