

Procedure information

Temporarily Implanted Nitinol Device

What is a temporarily implanted nitinol device procedure?

A temporary nitinol device, iTind, is implanted in the prostatic urethra (section of the water pipe that passes through the prostate), to improve the flow of urine.

Why is a temporarily implanted nitinol device required?

The iTind device is used for the management of benign prostatic enlargement.

It expands and opens the channel through the prostate, to improve the flow of urine.

What does insertion of a temporarily implanted nitinol device involve?

Insertion of a temporarily implanted nitinol device is minimally invasive prostate surgery and is performed as a day procedure in hospital.

Insertion of the iTind is done using a general anaesthetic (while you are asleep), with the use of a rigid cystoscope (device to look into the bladder).

The cystoscope and nitinol device are passed up the urethra (water pipe) into the bladder.

The iTind is then positioned in the urethra at the location of the prostate. At completion of the placement of the temporary implanted nitinol device, a retrieval suture will be left protruding from the urethra.

The suture is taped to the penis to keep it secure.

The device stays in place until removed five to seven days later.

Removal of the device is performed under sedation as a day procedure in hospital.

What is the recovery after insertion and removal of a temporarily implanted nitinol device?

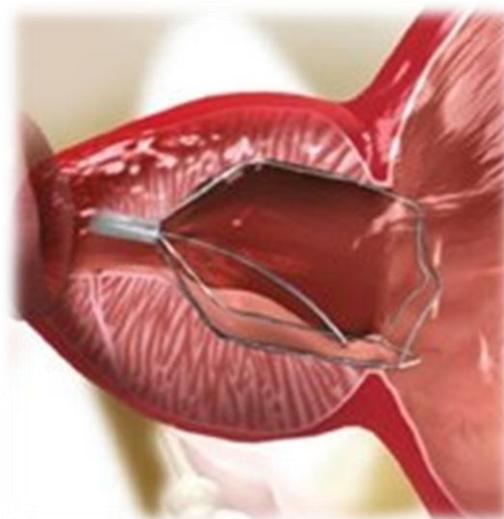
You may notice blood in the urine for a day or two after each procedure.

You may have mild burning and stinging when passing urine for a day or two after each procedure.

If you have sedation or a general anaesthetic, you can usually return to work one to two days after the procedure. Avoid strenuous work until the device is removed.

If you have sedation or a general anaesthetic, you will not be able to drive for 24 hours.

You will have a suture running from the iTind out of your penis. This will be taped to your penis. Do not cut or damage the suture as it is used to remove the device.



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You should avoid sexual activity, strenuous activity, heavy lifting, and activities such as sitting on a lawnmower or working with vibrating equipment, while the device is in place.

What are the benefits of a temporarily implanted nitinol device procedure?

- Minimally invasive.
- Does not require an overnight stay in hospital.
- Avoidance of side effects associated with medications.
- Preservation of sexual and ejaculatory functions.
- Routine catheter following procedure not required.

Note: The iTind treatment is a newer effective treatment for managing lower urinary symptoms associated with prostate enlargement. It has a lower durability of symptom relief, compared to more definitive treatments, such as TURP and HoLEP.

What are the risks of insertion of a temporarily implanted nitinol device?

The risks of this procedure include (but are not limited to):

Common risks:

- Discomfort with passing urine.
- Light blood in your urine.
- Frequency and urgency with urination.
- Feeling of pressure or discomfort in perineum. Worse with sitting.

Occasional risks:

- Urinary tract infection requiring antibiotics.

Rare risks:

- Inability to pass urine following procedures, requiring a catheter to be placed.
- Damage or scarring to the urethra requiring further treatment.

Very rare risks:

- Damage to the bladder requiring another procedure to correct.

Other uncommon or very uncommon risks of surgery and anaesthesia include:

- Blood clots in the legs (Deep vein thrombosis (DVT)) or lungs (Pulmonary embolus).
- Chest infection (Pneumonia).
- Heart attack.
- Stroke.
- A serious allergic reaction (Anaphylaxis).
- Death.

What are the alternative treatment options?

- Surveillance – no treatment.
- Lifestyle changes.

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- Medications.
- Water vapour therapy (Rezüm®)
- Prostatic urethral lift (UroLift®)
- Transurethral resection of prostate.
- Greenlight laser photovaporisation of the prostate.
- Holmium laser enucleation of the prostate (HoLEP).
- Open or robotic simple prostatectomy.
- Prostate artery embolisation.

This is general information only. Please consult your doctor for more information and treatment options.

For appointments and enquiries please contact 07 3830 3300.