

## **ROBOTIC ASSISTED LAPAROSCOPIC RADICAL PROSTATECTOMY (RALRP)**

### **What is this procedure?**

(RALRP) Robotic assisted laparoscopic radical prostatectomy is a surgical technique to remove the prostate for the treatment of prostate cancer.

RALRP uses advanced equipment called the “Da Vinci Robot”. This provides the surgeon magnified views and highly mobile laparoscopic tools, maximising the potential for precise surgical removal of the prostate and reconstruction.

### **How is it performed?**

The Surgeon makes 6 small incisions through which the laparoscopic surgical tools are inserted. In RALRP, these laparoscopic tools are connected to a “Robot” machine, which is controlled by the Surgeon. The largest incision is above the belly button and it is through here that the prostate is eventually removed.

RALRP is performed under a general anaesthetic and takes approximately 3-4 hours.

### **What to expect following surgery?**

There will be a urinary catheter in-situ (tube through the penis), which will usually be in place for **7-10 days**. The catheter enables the join between the bladder and urethra to heal.

Your Hospital stay is usually one night and before discharge, you must:

1. Have adequate pain control.
2. Be able to eat and drink.
3. Be able to manage your catheter. Nursing staff will assist you.

**THIS IS VITALLY IMPORTANT!**

The Surgeon or Anaesthetist will prescribe pain relief medications. Laxatives, water and mobilisation can help resolve or prevent constipation.

### **How can I help recovery?**

- Take it easy for the first 2 weeks post surgery.
  - Short walks are great for recovery.
- No heavy lifting for a month.
- You may shower after Day 1, post-surgery.
- Your catheter will continue to drain urine. It is not uncommon to occasionally see blood in the urine, particularly if there has been an increase in activity for the first few days.
- You can commence work and driving 1-2 weeks post surgery.

### **Physiotherapy: VERY IMPORTANT!**

You will be referred to a Pelvic Physiotherapist, for pre and post-operative pelvic floor education. You will be taught how to use your muscles correctly to move towards urinary continence.

### **Penile rehabilitation:**

Erectile dysfunction is common post RALRP. We suggest starting oral medication before surgery to help with erections and blood flow. Once the catheter has been removed, recommence the medication. We also often suggest using a Vacuum Pump device. Often erections can take 3-6 months to ‘return’.

### **Post-operative review:**

The Surgeon will review you the following morning in hospital prior to discharge and then contact you a week later, with the Histopathology results. Review with the Surgeon will be made 6 weeks later with your first post-operative PSA test.

### **When to seek help:**

- Your catheter is no longer draining urine.
- Your catheter has fallen out.
- You feel unwell; have a temperature, sweats or shakes or vomiting.
- Your wounds have become increasingly painful or begin to have significant discharge.