Before and After Your Surgery

Artificial urinary sphincter or male urethral sling surgery

This handout explains how to prepare for and what to expect after artificial urinary sphincter or male urethral sling surgery. These surgeries are done to treat male urinary incontinence. If you have any questions before or after your surgery, please call the Men’s Health Center at 206-598-6358.

Why do I need surgery?

Artificial urinary sphincter surgery and male urethral sling surgery are treatments for male urinary incontinence (bladder leaks). You may be a candidate for one of these surgeries if you have tried medicines and other noninvasive treatments to help with bladder control, but have not gotten the results you want.

Your health care provider will talk with you about these 2 types of surgery. Together, you will decide which surgery is the best way to treat your urinary incontinence.

What are the 2 types of surgery?

Artificial Urinary Sphincter Surgery (AUS)

In AUS surgery, a prosthetic device is placed inside your body. This is a man-made device that replaces a part of the body that does not work well.

The AUS device acts as an artificial sphincter (circular muscle) to control the flow of urine through your urethra (the tube that carries urine from your bladder to outside your body). The AUS device has 3 parts:

- A **cuff** is placed around your urethra in your perineum (the area between your anus and your scrotum), below your natural sphincter muscle, where your urethra is thick and healthy. When the cuff is inflated, it keeps urine from leaking.
- A **pump** is placed in your scrotum.
- A **balloon** is placed in your lower abdomen, usually behind your pelvic bone.
After the AUS device is placed, you will use the pump to deflate (let the fluid out of) and open the cuff when you are ready to urinate. This allows urine to pass through your urethra and out of your body.

**Male Urethral Sling Surgery**

During male urethral sling surgery, a *synthetic* (man-made) mesh sling is placed in your perineum below your urethra. It is attached on 2 sides to muscles or bones to hold it in place. This sling supports, compresses, and elevates your urethra. This helps your urethra have better control over bladder pressure when your bladder fills with urine.

**What do I need to do to prepare for surgery?**

**Day Before Surgery**
- Do not eat or drink anything after midnight the day before your surgery.
- Arrange for a responsible adult to drive you home from the hospital.

**Day of Surgery**
- If you need to take medicine on the morning of your surgery, take it with only a small sip of water.
- Wear loose and comfortable clothing.

**What can I expect after surgery?**

When you wake up after surgery, you will have a *catheter* (thin, flexible tube) in your penis to help you empty your bladder.

You may be admitted to the hospital or go straight home after surgery. If you go home, you are responsible for your own self-care. Please follow these instructions carefully:

**Precautions and Self-care**

For **24 hours** after surgery:
- Do not drive.
- Do not drink alcohol.
- Do not use heavy machinery.
- Do not eat heavy or large meals. A heavy meal may be hard to digest.
- Do not make important decisions. The anesthesia you received can make it hard to think clearly. It can take up to 24 hours to wear off.
- Rest. This will help reduce swelling.
- **Apply cold packs** (such as a bag of frozen peas) to your groin area to help reduce swelling:
  - Cover the area with a towel first. Do not place the cold pack directly on your skin.
- Leave the cold pack on for 20 minutes, then off for 20 minutes. Keep doing this for the first 24 hours after your procedure. Keep the area cool, NOT cold.

- While you are recovering in bed, do these exercises:
  - **Deep breathing and coughing.** These exercises will help prevent pneumonia (a lung infection).
  - **Ankle- and knee-bending.** These exercises help improve blood flow, and this helps prevent blood clots.

### Fluids and Food
- Drink plenty of water so that you stay hydrated.
- When you get hungry, start with clear liquids or light foods. Slowly resume eating your normal foods as you are able to handle them.
- Avoid spicy and greasy foods.

### Common Symptoms
You may have discomfort after the procedure. These common symptoms do not require a doctor’s attention:
- Bruising and some mild bleeding from your incision
- Pain in your penis, perineum, lower abdomen, or inner thigh (sling only)
- Some bruising or pain where the IV was inserted
- Some pink color in your urine

If you received general anesthesia, you may have a sore throat, nausea, constipation, and general body aches. These symptoms should go away within 48 hours.

### Medicine
- You may resume your usual medicines except for aspirin or other blood-thinners such as warfarin (Coumadin) and heparin. Your doctor will tell you when you can resume these medicines.
- If you have been prescribed antibiotics, take all of the antibiotics as prescribed, until all the pills are gone.

### Pain
- For mild discomfort, you can take acetaminophen (Tylenol) or ibuprofen (Advil, Motrin).
- For moderate pain, take the pain medicine your doctor prescribed. Many doctors prescribe Vicodin, Oxycodone, or Percocet for pain relief.

**If you are taking prescription pain medicine:**
- Do not drive while you are taking this medicine.
• If you are taking Vicodin, Oxycodone, or Percocet, always take it with food in your stomach so that you do not get nauseated.

• **Do not take acetaminophen while taking Vicodin or Percocet.**
  • If you are given pain medicine other than Vicodin or Percocet, ask your doctor or nurse if it is safe to take acetaminophen while you are taking your prescription pain medicine.
  • Prescription pain medicine may cause constipation, itching, nausea, and dizziness.
  • Avoid getting constipated. You may want to take Metamucil, milk of magnesia, or a stool softener. You can buy these at a drugstore without a prescription.

**Day After Surgery**

• Call the Men’s Health Center at 206-598-6358 to make a follow-up appointment in 1 to 2 weeks if you have not already done so.
  • Pain and swelling may be worse today than it was yesterday.
  • Your urinary catheter will be removed.
  • You may have a hard time urinating. Your nurse will check to make sure you are able to empty your bladder.
  • *For AUS patients:* Your new implant will be deactivated.
  • Your nurse will check your incision and change your dressing before you leave the hospital.

**Self-care**

• Keep your incision dry for 2 days after surgery. You may clean yourself with a damp washcloth. Cover the area with a plastic bag if you want to take a shower.
  • To reduce swelling, keep using cold packs on your scrotum (see pages 3 and 4). After 24 hours, stop using the cold packs.

**2nd Day After Surgery**

• Your penis and scrotum may be more swollen and bruised than they were on the 1st day.
  • Remove the yellow gauze on your perineum today. After you remove the gauze, apply antibiotic ointment such as bacitracin, Neosporin, or Polysporin to your incision twice a day for 5 more days.
  • *For AUS patients:* Remove the dressing on your abdomen today.
  • You may resume normal, **light** activity in 48 hours or when you feel better.
• If you want to take a shower on the 2nd day after surgery, cover the incision area with a plastic bag to keep the site dry. On the 3rd day after surgery, you may shower without covering the site.

**After 1 Week**

• Avoid strenuous exercise or heavy lifting for 4 weeks. After that, you can do all of your normal activities, but let discomfort be your guide. If an activity feels uncomfortable, slow down or stop and rest.
• *For urethral sling patients:* Avoid flexing your hip joints. This means no stepping up more than 1 step, no squatting, and no climbing.
• Avoid all sexual activity, including masturbation, for 6 weeks.
• Do not take a bath, sit in a hot tub, or go swimming for 6 weeks.
• You should be able to return to work in 1 to 2 weeks, depending on the type of implant you have and the type of work you do.
• Your incision will be closed with stitches. These will dissolve and do not need to be removed. It may take up to 3 to 4 weeks for them to dissolve all the way.
• It is normal for your incision to be a little red or to separate slightly.
• We will activate your AUS and show you how to use it at your follow-up visit in 5 to 6 weeks.

**When to Call the Clinic**

• After this surgery, **it is normal to have:**
  - Bruising around your incision
  - A small amount of bloody discharge from your incision

• **Call the Men’s Health Center if:**
  - Your incision becomes red, painful, or has a pus-like drainage
  - The amount of swelling concerns you

**Call the Men’s Health Center during clinic hours, or go to the Emergency Room after hours if you:**

• Have pain that is not controlled with your pain medicine
• Cannot urinate for more than 8 hours
• Have a fever higher than 101°F (38.3°C), with shaking and chills
• Have allergic reactions such as hives, rash, nausea, or vomiting to any of the drugs you are taking