RECOVERY FROM TELESCOPIC BLADDER SURGERY
Frequently-Asked Questions

What should I expect after my operation?

Some things are to be expected after telescopic surgery to the bladder.

- There may be bleeding and/or blood clots in your urine for a few days after the procedure. It may then clear but begin again, even after the urine has cleared initially. This can occur for up to 3 weeks after the operation and is known as secondary haemorrhage.
- It will be uncomfortable or even painful when you pass urine. This is to be expected because there has been a telescope in the water pipe (urethra).
- If there was a need to stretch the urethra to allow passage of the telescope, there may be some bleeding from the urethra itself when you pass urine or immediately afterwards. This bleeding invariably settles.
- You may feel tired or “washed out”.

Remember that, although the operation was a telescopic one, the body still reacts to it in the same way it would if an incision had been made.

Is there any way I can prevent these problems?

Yes, there is.

- Drink plenty of fluids (at least 2 litres daily) for the first 2-3 days. This will dilute your urine and reduce the chance that it will be uncomfortable or even painful when you pass urine. It also helps to keep the bladder flushed so that any blood clots are less likely to develop and the urine continues to flow easily.
- Take paracetamol for the first 24 hours or so (unless there is a medical reason why you should not take paracetamol). This will also help to make passing urine more comfortable.
- If you have been given a course of antibiotics to take home with you, it is important that you complete the course.
- Try to remain fairly active, resuming normal activities as soon as you feel able. This is likely to promote a more rapid recovery. You may find you need slightly more sleep than usual for the first few days after your discharge.
Are there any other things I should look out for?

Even if there is blood in your urine, it is unlikely that any discomfort in passing urine is due to infection. However, if you develop a fever (over 37.5°C) or if the urine becomes cloudy and thick, you could have an infection. In this event, you should promptly contact your GP (or his/her surgery) so that they can consider whether you need antibiotics.

If you pass more than the occasional small blood clot, you should increase your fluid intake (by drinking a litre of water over a couple of hours) and aim to maintain a fluid intake of 3 litres for the next 24 hours. This will help to flush through any continued bleeding.

If it becomes very painful to pass clots or difficult to pass urine at all, you should promptly contact for GP (or his/her surgery) so that they can assess your condition.

If you are unable to contact your GP’s surgery, please feel free to telephone your Urology Specialist Nurse (during office hours) or the Urology ward of your local Hospital (outside normal working hours).

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