

The Process:

- This procedure is done by the Radiation Oncologist and your Urologist
- Using the rectal ultrasound to verify placement, needles penetrate the perineal skin between the scrotum and the rectum
- The seeds are then injected with caution; this takes about 3 hours
- The procedure is done in the operating room of the hospital; you will have general anesthesia and an IV will be started
- A foley catheter will be inserted after you are asleep and may be left in for a day or two
- You will wake up in the recovery room and when you are fully awake, the catheter may be removed if ok with the urologist
- You will be discharged with instructions and prescriptions from the urologist
- You will experience swelling and soreness between the legs for a day or two
- 2 to 4 weeks after implant, you will see the radiation oncologist for a follow-up; at that time, you will be scheduled for a post-implant CT scan which is the final step in the process, this is done for final physics calculations to determine the exact dose of radiation the prostate received

Patient Preparation:

1. Stop any blood thinners one week before surgery; this includes aspirin, coumadin, plavix, persantine, ibuprofen, motrin, advil, aleve, indocin or alka seltzer
2. Follow a clear liquid diet the day before surgery; **NO SOLID FOODS**
 - **Foods allowed include:** carbonated beverages, coffee, tea, Kool-Aid, Gatorade, water, plain gelatin, clear ice popsicles, apple, cranberry and white grape juice and clear broth or bullion
 - **Foods to avoid include:** all solid foods and any liquid that you cannot see through
 - **Sample breakfast:** apple juice, tea or coffee and broth
 - **Sample lunch:** bullion, ginger-ale, jello and coffee or tea
 - **Sample dinner:** broth, white grape juice, jello and tea or coffee
3. At 4:00pm, the day before surgery:
 - Add 1 1/2 oz. Fleets Phospho Soda to 4 oz. water and drink
 - Follow with (1) 8 oz. glass of clear liquid
 - Drink at least 3 more glasses of clear liquids within the next hour
4. Repeat above again at 7:00pm
 - **Take (2) Gas-X tablets**
5. Nothing to eat or drink after midnight and **NO** smoking
6. On the day of surgery, take a Fleets enema one hour before leaving home
7. Take a list of your current medications with you to the surgery center

Discharge Instructions:

- **Diet:** resume your regular diet regimen
- **Activity:** avoid heavy lifting or strenuous physical activity for the first 2 days, after that, you may return to your normal activity level
- **Prescriptions:** your urologist will give you prescriptions for antibiotics, pain and medicine to improve urination after the implant

Possible side effects:

There are very few side-effects from the implant procedure. There may be some slight bleeding and swelling beneath the scrotum. Bruising or tenderness between the legs can be seen from the needle placement. Applying and ice bag will provide some comfort.

You may experience burning on urination, frequency of urination, mild discomfort or feeling unable to pass urine. These are common side effects and subside in 1 to 4 months. If you are unable to urinate at home, contact your urologist or go the emergency room. They will place a temporary catheter in the bladder until the swelling goes down.

You may notice blood in the urine for 24 hours after the procedure. If this persists or you pass clots, please contact your urologist.

Radiation safety rules to follow:

Radiation safety is of concern. The seeds are low-energy and lose activity within 2 months. The radiation is contained within the prostate gland. You are not radioactive. Items you touch or use are not radioactive. Your urine and stool are not radioactive.

Pregnant women and small children should avoid close physical contact for the first 2 months after the implant. They can be in the same room, but of a distance of 3ft. Small children should not sit on your lap. You may pick them up and hug them but then put them down.

Sexual intercourse using a condom may be resumed 2 weeks after implant. Ejaculate may be discolored dark brown, this is normal. Use a condom for at least 2 weeks after implant.

In the unlikely event that you find a seed, do not pick it up with your hands. Use a spoon or tweezers to pick it up and flush it down the toilet.

Follow-up:

Your urologist will inform you when to see him after implant. It is usually within a few days. Should you have any side effects, call the urologist.

Your radiation oncologist will see you in 1 month. You will be given information at that time to schedule a post-implant CT scan. This is done to enable the physician to determine the exact position of each seed in the prostate and for the final physics to be completed.

Follow-up with the urologist and radiation oncologist will be done on a regular basis.

Patients taking hormonal therapy:

Lupron or similar

- You will receive a depot injection that lasts for 3 months. Ask your urologist when to return for your next shot. Most patients receive at least 1-2 such injections. If you are receiving both seed implantation and external beam radiation, you may need 3 or more Lupron injections.
- You may experience “hot flashes” while on this medication. These are similar to the flashes experienced by women in menopause. These will go away after the medication is stopped. This can some times take up to 6 months after the last injection. In some cases, if the hot flashes are very bad, your urologist can treat you with Megace to control them. Megace must be stopped within 3 months of the last injection or testosterone levels will not return.
- If you have pain or swelling at the injection site, put ice on for the first 48 hours, followed by heat till it no longer bothers you.
- Most men become impotent after receiving Lupron. It usually takes about a month for this to occur. Sexual function should return about the time the hot flashes stop. The likelihood that sexual function will return is about 50%. A few men will also experience a decrease in the volume or loss of the ejaculate.

Casodex or Eulexin

- You will also be taking 1 pill of Casodex or 6 capsules a day of Eulexin (2 caps every 8 hours). This medication also helps to eliminate the cancer cells. You should continue to take the Casodex or Eulexin for 3 months after your last Lupron injection.
- Some patients experience diarrhea while on Eulexin. If this happens, stop the Eulexin and wait till the diarrhea stops. Restart the Eulexin, but at only one capsule a day. Slowly increase by one capsule per day until the full dose is reached. If the diarrhea recurs call your urologist.
- Eulexin has also been known to affect the liver. You should have your liver functions checked every 2-3 months after starting Eulexin.