

Chapter 43

Nursing Care of Male Patients With Genitourinary Disorders

Learning Outcomes

- Explain the pathophysiology associated with each male genitourinary and reproductive disorder discussed in this chapter.
- Describe the etiologies, signs and symptoms, and treatments of prostate disorders.
- Plan nursing care for men with genitourinary and reproductive disorders.
- Describe disorders of the testicles and penis and how they affect sexual function.

Learning Outcomes (continued)

- List selected physical and emotional causes of erectile dysfunction.
- Discuss the nurse's role in helping men cope with loss of sexual function.
- Identify disorders of the male reproductive system that interfere with fertility.
- List treatment options available for male infertility.

Prostate Disorders

- Prostatitis
- Benign prostatic hyperplasia
- Prostate cancer

Prostatitis

■ Etiology

- Acute bacterial prostatitis
- Chronic bacterial prostatitis
- Chronic prostatitis/chronic pelvic pain syndrome
- Asymptomatic inflammatory prostatitis

■ Signs and symptoms

- Pain
- Urgency
- Frequency
- Dysuria
- Urine retention
- Fever, chills

Prostatitis (continued_1)

■ Diagnostic tests

- Digital rectal examination (D R E)
- Urine culture
- Cystoscopy

■ Interventions

- Antibiotics
- Anti-inflammatory agents
- Stool softeners
- Sitz baths
- Prostatic massage
- Dietary changes
- Surgery

Prostatitis (continued_2)

- Nursing diagnoses

- *Urinary Retention*
- *Deficit Knowledge* about cause, treatment, and prevention of prostatitis
- *Acute Pain*

Benign Prostatic Hyperplasia (B P H)

- Increase in number of cells
- Signs and symptoms
 - Urinary retention
 - Dribbling
 - Nocturia
 - Dysuria
 - Urgency
- Diagnosis
 - D R E
 - Blood urea nitrogen (B U N), creatinine
 - Prostate-specific antigen (P S A)
 - Urodynamic flow studies
 - Transrectal ultrasound
 - Cystoscopy

Benign Prostatic Hyperplasia (continued)

■ Symptom control

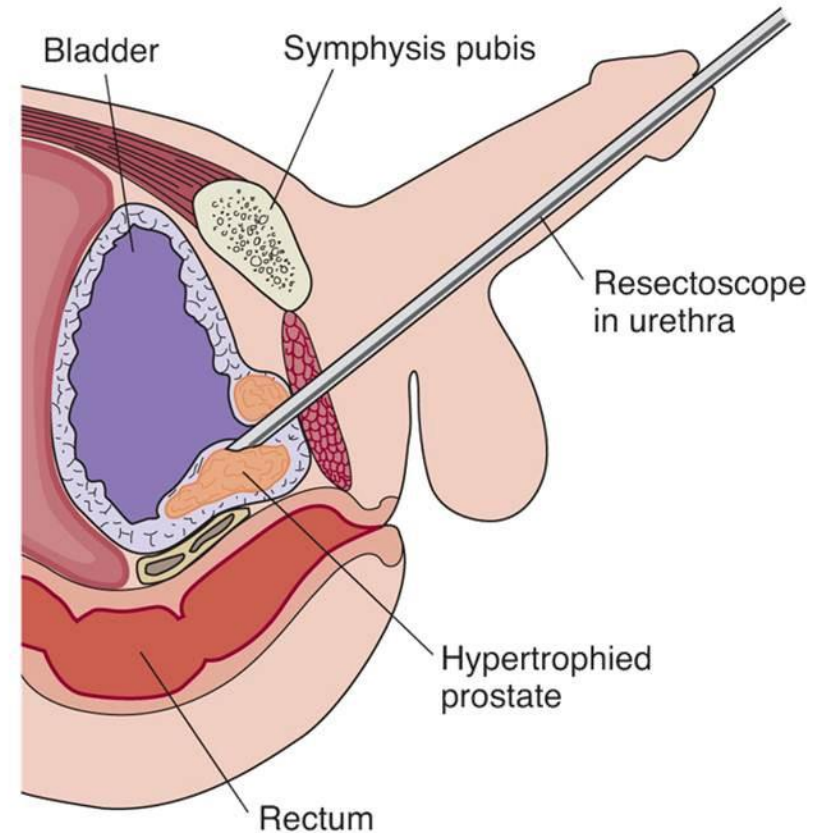
- Catheterization
- Fluids
- Antibiotics

■ Intervention

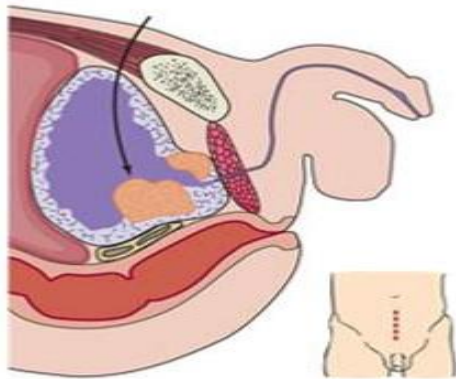
- Watchful waiting
- Alpha-adrenergic antagonists
- Hormone blockers
- Transurethral microwave therapy
- Transurethral needle ablation
- Surgery

Transurethral Resection of the Prostate (TURP)

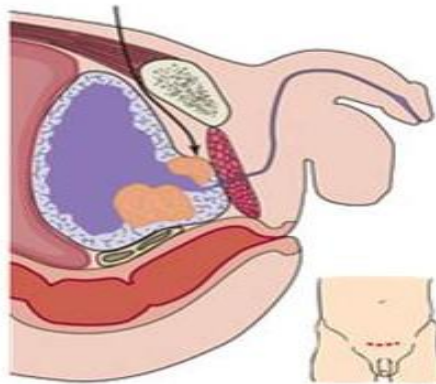
- Resectoscope into urethra
- Overgrown tissue chipped away



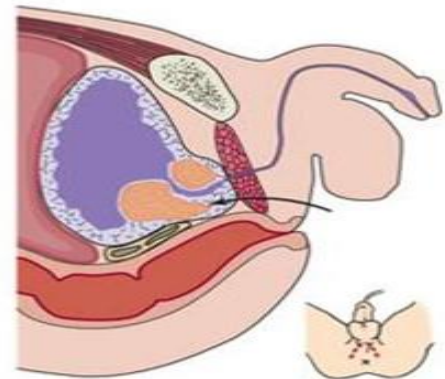
Prostatectomy



A. Suprapubic prostatectomy



B. Retropubic prostatectomy



C. Perineal prostatectomy

Prostate Surgery

- Nursing diagnoses
 - *Risk for Bleeding*
 - *Acute Pain*
 - *Urge Urinary Incontinence*
 - *Deficient Knowledge*
 - *Anxiety*

Postoperative Nursing Diagnoses

■ *Risk for Bleeding*

- Monitor urine output and bleeding.
- Encourage fluids.
- Teach patient to avoid
 - Constipation
 - Lifting
 - Aspirin and N S A I D's

Postoperative Nursing Diagnoses (continued_1)

- *Acute Pain* related to bladder spasm
 - Monitor pain.
 - Irrigate catheter as ordered.
 - Administer analgesics, antispasmodics.
 - Teach relaxation and deep breathing.

Postoperative Nursing Diagnoses (continued_2)

■ *Urge Urinary Incontinence*

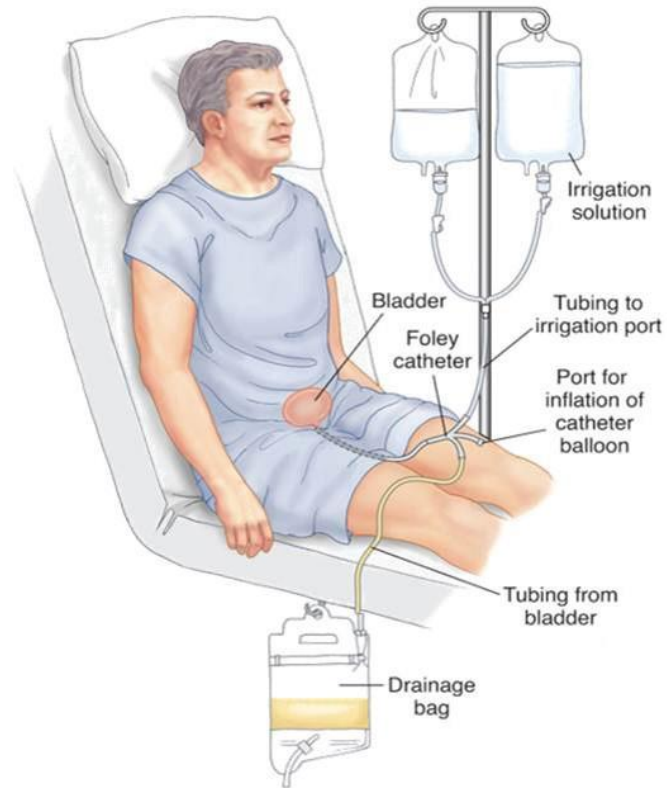
- Teach Kegel exercises.
- Offer condom catheter or pads.
- Encourage to continue fluids.
- Discuss prolonged incontinence with physician.

Postoperative Nursing Diagnoses (continued_3)

■ *Deficient Knowledge*

- Teach to avoid (about 6 weeks)
 - Heavy lifting
 - Stairs
 - Driving
 - Strenuous exercise
 - Straining
 - Sexual activity
 - Aspirin and N S A I D's
- Report signs and symptoms of urinary tract infection.
- Report increase in bleeding.

Bladder Irrigation



Postoperative Nursing Diagnoses (continued_4)

- *Anxiety* related to sexual function
 - Explain
 - Retrograde ejaculation
 - Talk with physician if erectile dysfunction occurs.

Prostate Cancer

- Risk factors
 - Over 65
 - High testosterone
 - High-fat diet
 - Family history
 - Occupational exposures

Prostate Cancer (continued_1)

- Signs and symptoms

- Rare in early stages
- Later stages
 - Urinary obstruction
 - Hematuria
 - Urinary retention
- Advanced
 - Bone pain
 - Anemia
 - Weakness
 - Weight loss

Prostate Cancer (continued_2)

■ Diagnostic tests

- D R E
- P S A
- I s o P S A
- Transurethral ultrasound with biopsy
- Bone scan

Prostate Cancer (continued_3)

- Therapeutic interventions
 - Early stages
 - Testosterone-suppressing medications
 - Later stages
 - T U R P or open prostatectomy
 - Radiation therapy
 - Metastatic
 - Orchiectomy, estrogen therapy
 - Chemotherapy, radiation
 - Radical prostatectomy

Penile Disorders

- Peyronie disease
 - Penis curved: Fibrous bands
- Priapism
 - Prolonged painful erection
- Phimosis/paraphimosis
 - Foreskin not retractable

Cancer of the Penis

- Risk factors
 - Uncircumcised
 - Human papillomavirus (H P V)
- Therapeutic interventions
 - Surgery
 - Radiation
 - Chemotherapy

Testicular Disorders

- Cryptorchidism
 - Undescended testes
- Hydrocele
 - Fluid in scrotal sac
- Varicocele
 - Varicose veins of scrotum
- Epididymitis
 - Inflammation
 - Infection
- Orchitis
 - Testicular inflammation or infection

Testicular Cancer

■ Risk factors

- Cryptorchidism
- Family history
- Diethylstilbestrol (D E S) use by mother
- Caucasian
- High socioeconomic status

Testicular Cancer (continued_1)

- Signs and symptoms
 - Early stages
 - Painless lump
 - Swelling
 - Late stages
 - Symptoms of metastasis

Testicular Cancer (continued_2)

- Diagnostic tests
 - Ultrasound
 - Chest x-ray
 - Blood for tumor markers
 - Biopsy
 - Staging

Testicular Cancer (continued_3)

- Therapeutic interventions
 - Surgery
 - Radiation
 - Chemotherapy

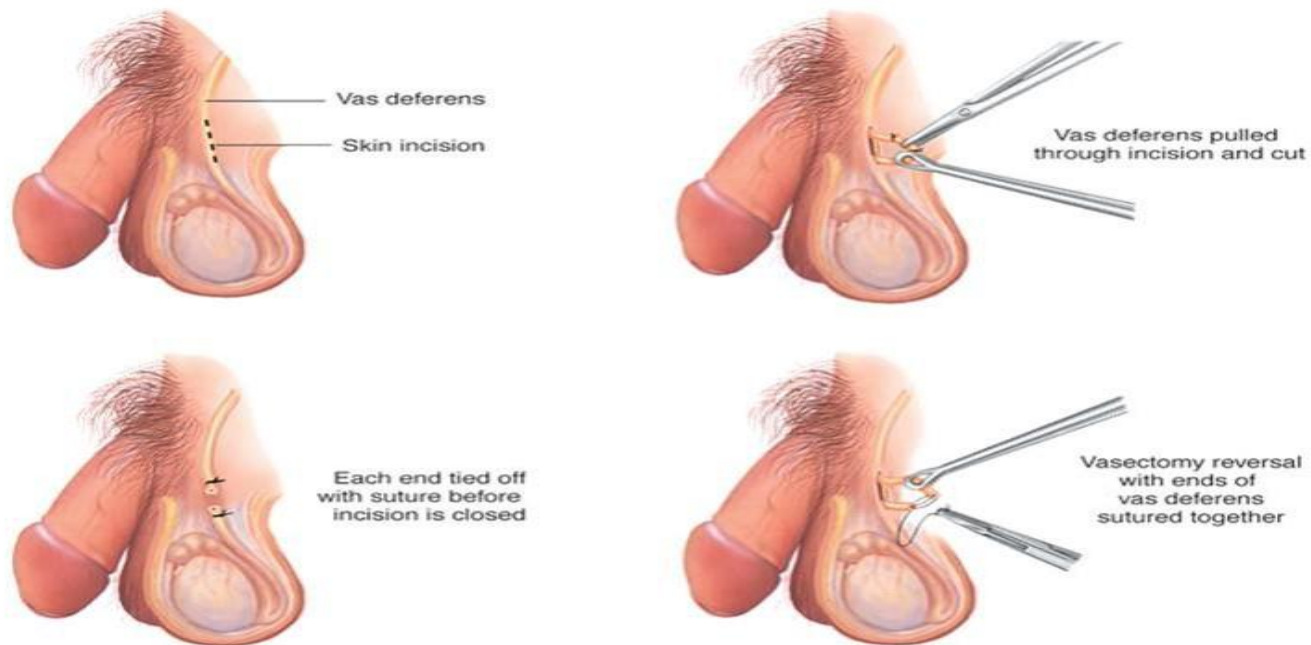
Testicular Cancer (continued_4)

- Nursing care
 - Teach testicular self-examination.
 - Provide emotional support.
 - Discuss sperm bank deposit.
 - Offer cancer support group.

Vasectomy

- Interruption of vas deferens
- Provides permanent birth control
- Effective about 3 months following surgery

Vasectomy (continued)



Erectile Dysfunction

- Problem obtaining or maintaining erection
- Pathophysiology/etiology
 - Physical
 - Circulation
 - Nerve supply
 - Hormone balance
 - Limbic system
 - Obstructive sleep apnea
 - Psychosocial
 - Stress
 - Illness
 - Fatigue
 - Alcohol/drugs

Erectile Dysfunction (continued_1)

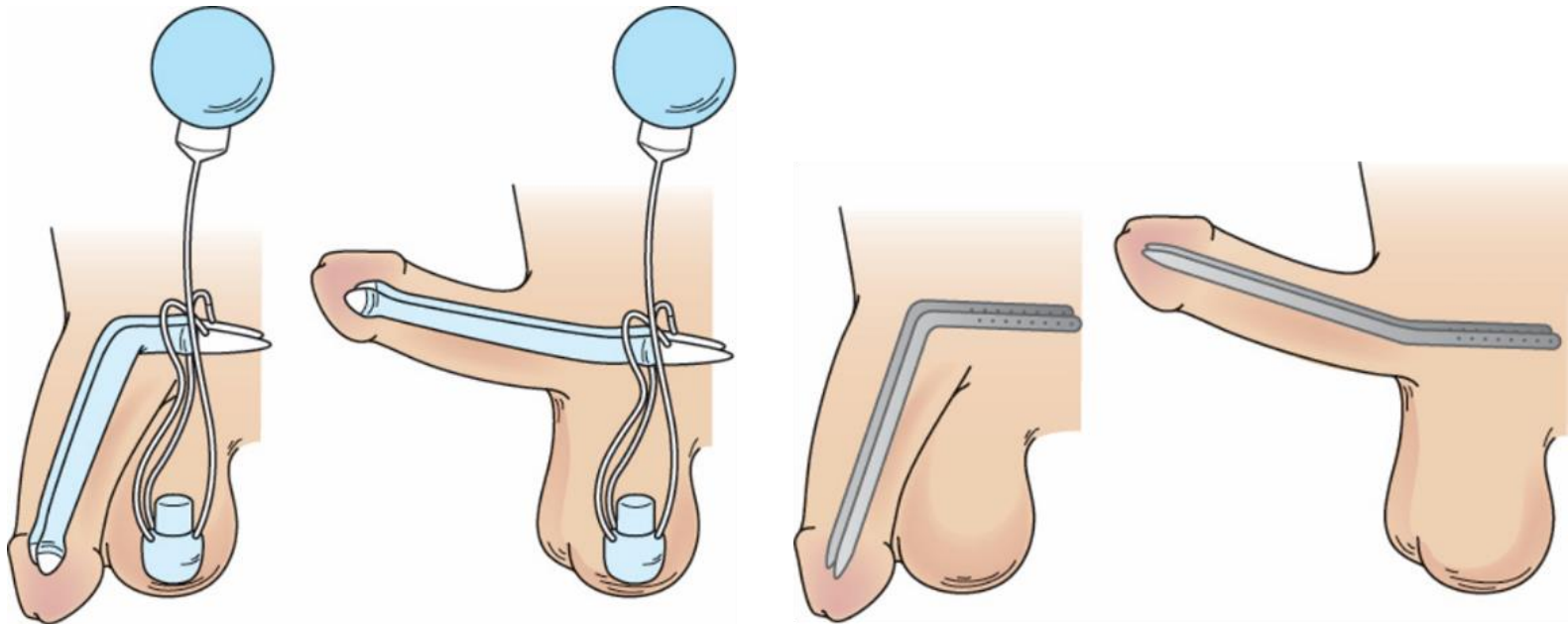
- Diagnosis
 - History
 - Blood tests
 - Glucose
 - Testosterone
 - Evaluation of circulation
 - Psychosocial evaluation

Erectile Dysfunction (continued_2)

■ Therapeutic interventions

- Medication changes
- Oral medication
 - Sildenafil (Viagra)
 - Tadalafil (Cialis)
 - Vardenafil (Levitra)
- Hormone therapy
- Herbal remedies
- Medication
 - Injection
 - Transurethral
- Devices
- Surgery
 - Implants
 - Vascular surgery

Penile Implants



Erectile Dysfunction (continued_3)

- Nursing diagnosis
 - *Sexual Dysfunction*

Infertility

■ Causes

- Pretesticular
 - Endocrine
- Testicular
 - Varicocele
 - Idiopathic
- Post-testicular
 - Surgery

Infertility (continued_1)

- Diagnostic tests
 - Sexual practices
 - Lifestyle practices
 - Occupation
 - Medical-surgical history
 - Physical examination
 - Semen analysis

Infertility (continued_2)

- Therapeutic interventions
 - Changes in lifestyle practices
 - Surgery if indicated
 - In vitro procedures

Review Question

The nurse is caring for a male client with complaints of frequency, urgency, and feeling that he cannot empty his bladder. The nurse anticipates preparing the client for which procedure?

1. Blood test for prostate-specific antigen
2. Blood test for human chorionic gonadotropin
3. Digital rectal examination of the prostate
4. Urodynamic flow study

Review Question Answer

Correct Answer: **3**

Review Question (continued_1)

A client has a diagnosis of benign prostatic hyperplasia and asks what the doctor means by “watchful waiting.” Which response by the nurse is best?

1. “The doctor will have you visit once a month to check out your prostate.”
2. “The doctor will want you to report back on your symptoms regularly to monitor your condition.”
3. “You don’t have anything wrong with your prostate yet, but you will need to get it checked on often.”
4. “I am not really sure what he means by that, but I will have him come back and talk to you.”

Review Question Answer (continued_1)

Correct Answer: **2**

Review Question (continued_2)

Which assessment findings are expected in a man diagnosed with varicocele? *Select all that apply.*

1. Scrotum is tender and red.
2. Scrotum feels like a “bag of worms.”
3. Painless lump is noted on testicle.
4. Testicle is extremely tender.
5. Symptoms are worse when standing.

Review Question Answer (continued_2)

Correct Answer: **2, 5**

Review Question (continued_3)

A 28-year-old male reports to the nurse that he has been having trouble maintaining an erection. Which assessment finding should the nurse further explore?

1. His father had prostate cancer at 70 years of age.
2. He has had multiple sex partners over the last 5 years.
3. He drinks about a case of beer over each weekend.
4. He smokes 2 packs of cigarettes per day.

Review Question Answer (continued_3)

Correct Answer: **3**

Review Question (continued_4)

A client has returned from a transurethral prostatectomy with a continuous bladder irrigation. Which of the following assessment findings should the licensed practical nurse/licensed vocational nurse report to the registered nurse?

1. Blood pressure is 135/80, pulse is 88, respirations are 20, and temperature is 98.0 degrees Fahrenheit.
2. Client states his pain is a level 6 out of 10.
3. The catheter bag contains bright cherry red urine.
4. The catheter tubing is secured to his abdomen.

Review Question Answer (continued_4)

Correct Answer: **2**