iTind Procedure (In Office)

What is iTind?

The iTind System is a minimally invasive treatment for relieving the symptoms of benign prostatic hyperplasia (BPH). The iTind device is placed into the prostate in a folded configuration where it slowly expands and exerts gentle pressure at three precise points. The temporary implant is designed to increase prostatic urethral patency by increasing prostatic opening, improving the flow of urine and emptying of the bladder. After 5 to 7 days, the device is completely removed. The new channels continue to provide long-lasting relief of BPH symptoms.

How the iTind Procedure works?

The iTind procedure is a straightforward treatment performed by a urologist.

The device is placed in the prostatic urethra in a folded configuration. During the 5 to 7 day treatment, it slowly expands and exerts pressure at three precise points to widen the opening through which urine flows through the prostatic urethra and then out of the body. You will have a suture string running from the iTind and out of your penis. The suture string will be taped to the shaft of your penis.

DO NOT CUT OR DAMAGE THE SUTURE STRING.

After 5 to 7 days, the device is completely removed. Clinical studies demonstrate that the newly remodeled prostatic urethra will continue to provide long-lasting relief of BPH symptoms.

Prior to the iTind procedure

1. You will have a pre-op appointment with our office one week before your procedure date and answer any questions. They may also call in prescriptions needed for the procedure to your pharmacy at this time.

2. If your procedure is canceled or must be rescheduled we will notify you as soon as possible and discuss potential dates for rescheduling surgery.

3. If you have to cancel or reschedule the procedure, we require one week's notice. If cancellation or rescheduling occurs less than one week, a $100 rescheduling/cancellation fee will be applied to your balance.

4. Please fill all prescriptions that we give you and read the instructions on the bottle. These prescriptions will have been given to you at your preoperative appointment or when we call prior to your procedure.

5. Please note: Any narcotic medication (Tylenol with Codeine, Hydrocodone, Vicodin, Norco, Oxycodone, and Percocet) can cause constipation. It is recommended to get over the counter Miralax and a stool softener to help prevent constipation if you choose to use these medications.

6. We utilize a nitrous gas system in the office during the iTind called Pro-nox. This is optional. This is not covered by insurance and there is a self-pay cost if you choose to utilize it. This amount will be collected when you check-in the day of your iTind.

7. Know the arrival time and date of your procedure.

*If you take any blood thinners on the following list, this will need to be discussed with your provider. Do not stop these medications on your own, unless otherwise noted by your cardiologist or Dr. Trotter/Dr. McClintock.

o Plavix (Clopidrogel)

o Pradaxa (Dabigatran)

o Xarelto (Rivaroxaban)

o Elquis (Aphixaban)

o Effient (Prasugel)

o Brillinta (Ticagrelor)

o Aspirin or Baby Aspirin

o Fish Oil

o Meloxicam

<u>Medications prescribed for your procedure:</u> Please read the instructions below and ON the medication bottles for when, why and how to take them.

-Ceftin 500mg #18, 1 tablet by mouth twice a day, Start the day before the procedure.

-Medrol Dose Pack, Start the day before the procedure.

-Journavx, Start the day before the procedure. Take 2 tablets (100 mg) by mouth once on the day before the procedure as a loading dose. Then take 1 tablet (50 mg) by mouth every 12 hours starting 12 hours after the loading dose. May take on an empty stomach or at least 1 hour before or 2 hours after food.

-Ibuprofen 800mg #30 Take 1 tablet my mouth every 4-6 hours as needed.

-Pyridium 200mg #40, 1 tablet by mouth every 8 hours as needed. Start taking after procedure. Take as needed for bladder discomfort or burning with urination. Urine will appear orange when taking medication.

-Gemtesa 75mg, 1 tablet by mouth daily for 7 days starting the day of the procedure.

THE MORNING BEFORE THE iTind PROCEDURE

1. Start your antibiotic, Medrol dose pack, and Journavx.

2. Avoid alcohol, coffee and other caffeinated beverages 48 hours prior to the procedure.

3. Ensure that you have all of your prescriptions.

THE DAY OF THE iTind PROCEDURE

1. You may eat a light breakfast if your iTind is in the morning. If your iTind is in the afternoon, feel free to have breakfast, and then a light lunch.

2. Continue taking all of your routine prescriptions medications. (Except blood thinners as previously discussed.)

3. We utilize a nitrous gas system in the office during the iTind called Pro-Nox. This is optional. This is not covered by insurance and there is a self-pay cost if you choose to utilize it. This amount will be collected when you check-in the day of your Urolift.

4. Bring all of your prescriptions that we have prescribed for you to your procedure.

While the iTind is in place:

During the 5 to 7 days the iTind is implanted, most patients report only mild to moderate discomfort, however patient experience is variable. While the device is in place, you may experience the following:

- Slight burning during urination.
- Light blood in your urine and possibly the passing of some small clots. This usually resolves over the first 2-3 days following implantation of the device.
- It is recommended that you wear an absorbent pad in your undergarments to manage any moisture that may wick from the retention suture to your undergarments or clothing during the implantation period.
- A greater frequency and urge to urinate. The device will be applying pressure in the area where your bladder meets your prostate. This is usually felt most strongly during the first 2 or 3 days, after which the feeling begins to subside.
- The feeling of pressure and the presence of a foreign object in the area of your perineum. Most patients experience this as being a little uncomfortable, especially when sitting on a hard surface. Resting in a recliner type chair may minimize discomfort. Some patients experience more than mild to moderate discomfort and your physician may prescribe painkillers or a nonsteroidal anti-inflammatory drug if this happens.
- You will be given an antibiotic to help avoid infection. It is important for you to follow the guidance your urologist provides in taking antibiotics and any additional medications.

Once You Are Home After iTind Procedure:

1. Continue and complete your antibiotic/medications as prescribed.

2. Use any of the other prescribed medications if needed. Directions on when, how and why to take will be on the bottle.

3. If you go home with a catheter, ensure it is draining well. Empty the bag as needed.

4. Continue your prescribed medications for your prostate.

5. Stay off any blood thinners until directed to resume.

6. If you have a catheter in place it is normal to have bladder spasms/discomfort, burning with urination, blood in your urine, penile irritation when in place and for a few days after it is removed. It will be normal to see blood and clots in your catheter bag after the procedure.

The Removal Procedure:

Most patients feel an immediate relief from symptoms upon removal of the device and have a good urinary stream. While uncommon, if you are not able to urinate at the end of the procedure, a catheter may be temporarily placed to help empty your bladder.

Mild episodes of blood in urine are possible for a few days to 1 week after the procedure but this will resolve on its own.

Post Procedure Limitations:

Exercising/Weights/Riding Bikes: 1 week after device removal

Sex: 1 week after device removal

Water activities (lake/pool/bath): 1 week after device removal

When will I feel results?

Most patients start to experience symptom relief right after removal of the device. Symptoms typically continue to improve over the following 6-12 weeks.

What are the risks?

Every surgical procedure includes risk. There are no known long-term risks associated with iTind.

How do I follow up?

You will be scheduled for the device removal 5-7 days after initial treatment.

2 week follow up in office post device removal for bladder scan with provider.

When do I call the office?

We ask you contact our office if you have: temperature over 102 degrees, excessive urinary bleeding or bleeding from the penis, continuous bladder spasms, symptoms of infection, painful/swollen/inflamed testicle(s) or scrotum, inability to urinate, uncontrolled pain or, if you have a catheter that is not draining.

Important Contact Information

Midtown Urology
911 W. 38th Street, Suite 200
(512) 451-7935 phone
(512) 451-7965 fax
If you need to reach the doctor after hours for an urgent matter, please call our office at 512-451-7935 and follow the prompts to be connected with the on-call provider.
You may also go to Seton Main Emergency Room on 38th and N. Lamar. Please only go to this hospital as our physicians have privileges there.

Hospital for Emergencies

Seton Main Medical Center
1201 W 38th St, Austin, TX 78705