

# Us Too Warriors, Information about biopsy and radiation treatment you can use.

Peter

## Clinical comparison of the efficacy of three different bowel preparation methods on the infectious complications following transrectal ultrasonography guided prostate biopsy in nursing practice.

To assess the effects of three different bowel preparation methods on the incidence of infectious complications in patients who underwent transrectal ultrasonography (TRUS) guided prostate biopsy.

The standard bowel preparation protocol for prostate biopsy has not been established.

A retrospective study in a single center.

From January 2013 to December 2015, the clinical records of 1130 patients who underwent prostate biopsy were respectively reviewed. All the patients received metronidazole prophylaxis before biopsy. The patients were divided into three groups according to the bowel preparation methods: patients in Group A (n = 402) received only soapy enema; patients in Group B (n = 413) received polyethylene glycol (PEG); while patients in Group C (n = 315) received PEG plus povidone iodine (PVP-I) enema. Infectious complications were classified as fever (greater than 37.5°C), urinary tract infection (UTI) and sepsis. The post-operative adverse events were also observed.

The overall post-biopsy infectious complications were observed in 48 (4.25%) patients of all the cases, including 23 (5.72%) cases in Group A, 20 (4.84%) cases in Group B and 5 patients (1.59%) in Group C. There was significant difference among the groups (P = 0.018). In detail, these infectious complications included 22 (1.95%) cases of fever and 26 (2.30%) cases of UTI. No sepsis was observed among the total patients. The incidence of adverse events was 14.43% (58/402) occurred in Group A, 25.91% (107/413) in Group B, and 26.67% (84/315) in Group C. The difference was statistically significant.

Our study confirmed that combined preparation regimens of PEG with PVP-I enema could significantly reduce the post-biopsy infection rate. Conventional soapy enema is associated with less adverse events.

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Findings of this study provide useful evidence-based information for healthcare professionals. The application of combined preparation regimens of PEG with PVP-I enema resulted in better improvement in the prevention of post-biopsy infection. This article is protected by copyright. All rights reserved.

Journal of clinical nursing. 2017 Apr 12 [Epub ahead of print]

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