Chapter 67:

LEARNING OBJECTIVES

On completion of the chapter, the reader will be able to:

1. Compare and contrast the mechanism of action, indications, and adverse effects of α-adrenergic agonists, 5α-reductase inhibitors, phosphodiesterase inhibitors, and anticholinergic agents for treatment of benign prostatic hyperplasia (BPH).
2. List the factors that guide selection of a specific treatment for an individual patient.
3. Select an appropriate treatment for a patient based on patient-specific data.
4. Explain the pathophysiologic mechanism of BPH and relate these to the role of various medication classes for management.
5. Formulate appropriate counseling information to be provided to a patient on medical treatment for BPH, given patient-specific information and the prescribed regimen.
6. Differentiate between obstructive and irritative voiding symptoms.
7. Explain how common medications can cause lower urinary tract symptoms (LUTS).
8. Describe a monitoring plan for a patient who receives medical treatment for BPH.
9. Characterize the ideal patient for watchful waiting for management of BPH.
10. Describe the potential clinical advantages of third-generation uroselective α-adrenergic antagonists over second-generation agents for management of BPH.
11. Characterize the ideal patient for combination treatment with an α-adrenergic antagonist and a 5α-reductase inhibitor for management of BPH.
12. Explain the clinical limitations of phosphodiesterase inhibitors for management of BPH.
13. List patient education strategies that can be employed when phosphodiesterase inhibitors fail.
14. Explain why uroselective anticholinergic agents can cause systemic anticholinergic adverse effects.
15. Explain why testosterone supplements should be used cautiously in patients with BPH.