

Lower Urinary Tract Symptoms (LUTS) in men

What are lower urinary tract symptoms (LUTS)?

LUTS (lower urinary tract symptoms) is a term used to describe a range of symptoms related to problems of the lower urinary tract (bladder, prostate and urethra). LUTS are broadly grouped into voiding (obstructive) symptoms or storage (irritative) symptoms. A man may have mainly voiding symptoms, mainly storage symptoms, or a combination of both.

What causes LUTS?

LUTS, especially if pain on urination (dysuria) is also present, may be caused by an acute problem such as a urinary tract infection, inflammation of the prostate gland (prostatitis) or less commonly, bladder stones.

Storage symptoms or overactive bladder (OAB – defined as urgency, with or without urge incontinence, usually with frequency and nocturia) may indicate an underlying chronic medical condition such as obesity,

Other causes of LUTS include some medicines and neurological diseases such as stroke and Parkinson's disease. There are also links between LUTS and depression and erectile dysfunction.

It is common for there to be several factors acting at the same time to cause LUTS and the exact cause is not always easy to find.

Can LUTS be prevented?

A man is less likely to get LUTS if he has a healthy lifestyle and body weight, does not smoke and gets treatment for any medical conditions such as diabetes, high blood pressure or sleep apnoea. For a man with LUTS, reducing caffeine and alcohol intake (these substances can irritate the bladder), avoiding constipation (straining to pass stools can affect pelvic floor muscles, which are important for both bowel and bladder control), and reducing body weight may help to improve the symptoms.

When should I see a doctor for LUTS?

LUTS is not just a normal part of ageing so it is a good idea to see your local doctor (GP) if you notice any changes to urination, particularly if the symptoms are affecting your quality of life or interfering with normal daily activities.

Many people think that urinary symptoms in men are a sign of prostate cancer. This is not true. Prostate cancer may sometimes be present with urinary symptoms but most often it is not and the LUTS have other causes.

If needed, the doctor may refer you to a urologist. Urologists specialise in diseases of the urinary tract in men and women, and the genital organs in men.

LOWER URINARY TRACT SYMPTOMS (LUTS) IN MEN

VOIDING OR OBSTRUCTIVE SYMPTOMS

- Hesitancy – a longer than usual wait for the stream of urine to begin
- Weak and poorly directed stream of urine
- Straining to urinate
- Dribbling after urination has finished or an irregular stream
- Chronic urinary retention – not all the urine is passed from the bladder causing a need to urinate more often
- Overflow or paradoxical incontinence – urine overflows from a full bladder uncontrollably even though normal urination can be difficult to start

STORAGE OR IRRITATIVE SYMPTOMS

These are also symptoms typical of OAB (overactive bladder)

- Urgency – an urgent feeling of needing to urinate
- Frequency – a short time between needing to urinate
- Nocturia – a need to pass urine two or more times during the night.
- Urge incontinence – a sudden, intense urge to urinate followed by an uncontrolled loss of urine

How common are LUTS?

LUTS are common in men and are more likely as men get older; however, LUTS can also happen in young men, although the cause of the symptoms may be different. A large Australian study has shown that about one in fourteen (7%) men in their 40s, increasing to nearly one in three (29%) men over the age of 70, reports moderate to severe LUTS. A smaller Australian study of men 35 to 80 years old found that storage symptoms were twice as common as voiding symptoms (28% versus 13%).

diabetes (high glucose levels in the blood), high blood pressure or obstructive sleep apnoea, or be due to the effects of smoking. Lifestyle factors including drinking fluids late at night, too much alcohol or caffeine, or low levels of physical activity can make storage symptoms worse.

Voiding symptoms are usually due to a blockage of the outlet of the bladder making it more difficult to pass urine. The blockage may be caused by an enlarged prostate gland or a urethral stricture (scarring of the urethra). Enlargement of the prostate gland can lead to both storage and voiding symptoms.

How are LUTS diagnosed?

The tests used to diagnose LUTS depend on the likely cause, based on the man's age and details given in the medical history, including the type of symptoms, the presence of other health conditions, such as diabetes, and medicines the man may be taking. The tests may include the following:

- **urinalysis:** urine tests to check for signs of infection or cancer in the urinary tract or kidneys
- **digital rectal examination (DRE):** to check if prostate disease is present. The doctor places a gloved finger in the rectum (back passage) to check the size and shape of the prostate, and to feel for problems with the prostate gland.
- **voiding or bladder diary:** a man may be asked to keep a diary of his urination to look at pattern and frequency of voiding. These diaries are particularly helpful for men with storage symptoms
- **a prostate specific antigen (PSA) blood test:** this test may be done if the symptoms suggest that prostate disease is present. PSA is a protein that is made only in the prostate gland
- **ultrasound:** can be used to measure the amount of urine left in the bladder after urination and to check the prostate gland
- **cystoscopy:** a small video telescope is inserted into the penis via the urethra.

How are LUTS treated?

When deciding on the best treatment, the doctor will take into account the type of LUTS, the cause of the LUTS and other factors such

LUTS TREATMENTS

Management of underlying conditions and lifestyle measures	<ul style="list-style-type: none"> • Managing medical conditions such as obesity, hypertension, obstructive sleep apnoea, heart conditions, kidney conditions and diabetes; review of use of medicines. • Changes in diet, including a lower intake of saturated fat, fewer calories, reduced alcohol intake and limiting caffeine to the early parts of the day; and regular physical activity.
Oral medicines (tablets)	<ul style="list-style-type: none"> • alpha-blockers – relax the bladder outlet and the muscles of the prostate gland; used to help symptoms due to prostate enlargement • anticholinergics (or antimuscarinics) – reduce contraction of the bladder; used to help storage symptoms or overactive bladder • phosphodiesterase inhibitors (tadalafil) – used to treat erectile dysfunction but can also help reduce storage and voiding LUTS • 5-alpha reductase inhibitors – only used if the prostate is enlarged and usually taken in combination with alpha-blockers. Note that 5-alpha reductase inhibitors may lead to erectile dysfunction and loss of libido (sex drive.)
Surgery (for LUTS due to prostate enlargement or other obstruction)	<ul style="list-style-type: none"> • transurethral resection of the prostate (TURP), transurethral incision of the prostate (TUIP) or prostatectomy (very rare for LUTS) • holmium laser enucleation (HoLEP), green light laser (PVP)

as the degree of bother caused by the LUTS and lifestyle factors.

Lifestyle changes or managing other health conditions such as diabetes or hypertension may be the first option. If symptoms are not very bothersome, the best approach may be to monitor the LUTS through regular checks with the doctor.

If the LUTS are bothersome, oral medicines (tablets) can help. The medicine suggested by the doctor will depend on the type and cause of LUTS. In some cases several medicines may be tried to see whether they improve the symptoms.

Surgery is only done in severe cases of prostate enlargement or other serious causes of obstruction. Surgery is the most effective treatment for relieving symptoms caused by an enlarged prostate but it has potential side-effects.

For more information visit www.andrologyaustralia.org, call 1300 303 878, or speak to your doctor.

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