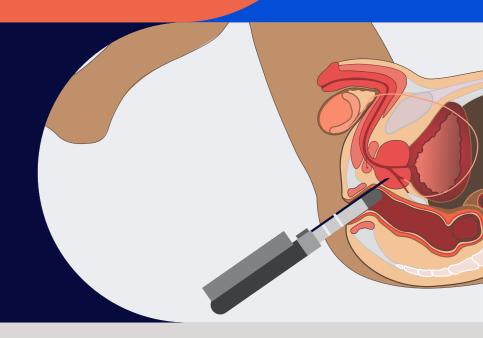


Transperineal Prostate Biopsy

Transrectal Prostate Biopsy



Post-procedure complications and readmissions

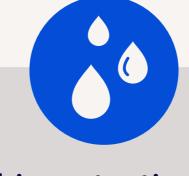
Over a ten-year period, data from the UK National Health Service (NHS) was collected to evaluate the clinical and financial implications of performing prostate biopsies via a transrectal versus transperineal approach.

The primary evaluation focused on 28-day post-procedure complications and readmissions, with a secondary focus on burden of expenditure in NHS hospitals over the entire decade.













Sepsis

Infections

Urine retention

NEL admission

Cost of post procedural side effects

Over 10 years (2008 to 2019)



486,467

98,588

Transperineal Prostate Biopsies



Patients had prostate biopsies



387,879

Transrectal Prostate Biopsies



28 days after the recorded biopsies

Method	Patients with				
	NEL admission	Sepsis	Infections	UTIs	Total biopsies
TP	4,083	310	757	950	98,588
TR	15,092	2,040	4,487	4,520	387,879
P value	0.00032	<0.001	<0.001	<0.001	



Sepsis

0.31% vs 0.53% TR

UTIs

0.96% vs 1.17%

per patient

Averaged cost of complications per patient post biopsy method (including NEL admission, Sepsis and Infections):

£1,758.00

TP

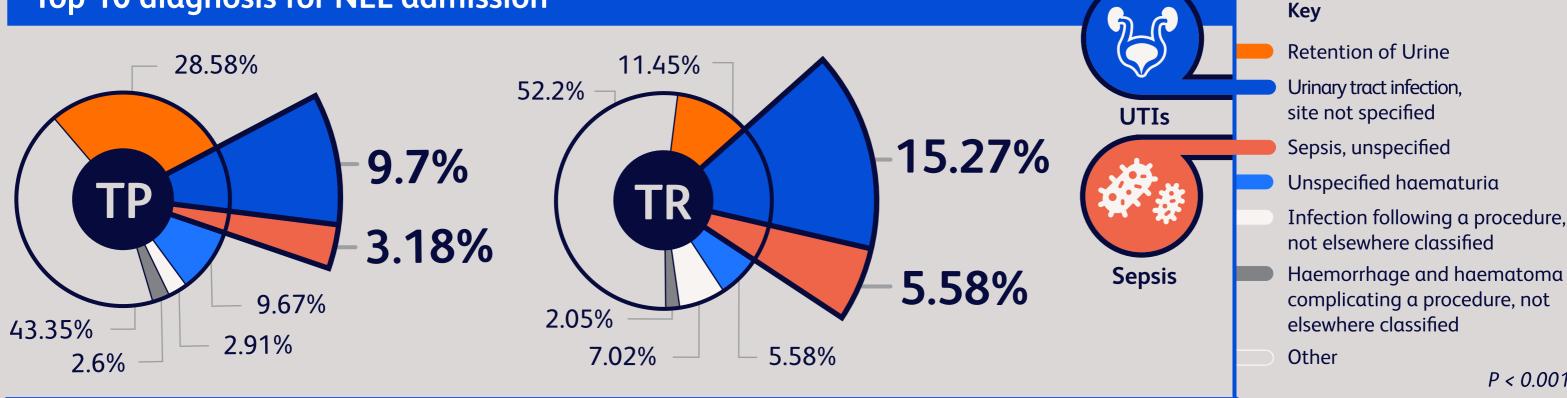
TR

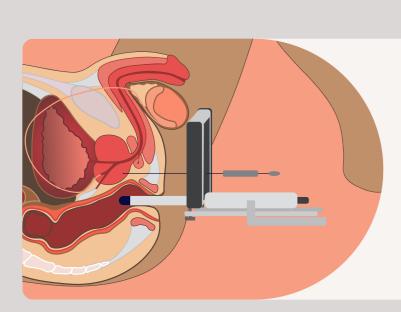
£2,225.00

P < 0.001

P < 0.001

Top 10 diagnosis for NEL admission





Assuming that all TR biopsies within the decade were performed using a TP approach the downstream savings for managing NEL admissions would have been £7,501,655.28 considering a 4.14% admission rate.

However, these TP procedures would need to be performed in outpatients under local anaesthetic to reduce the cost and resource of a general anaesthetic.

Large (n=486,467) retrospective review of prospectively maintained data.

Reference.

Tamhankar S A. et al. (2020) The clinical and financial implications of a decade of prostate biopsies in the NHS: analysis of Hospital Episode Statistics data 2008–2019. BJU International. 126(1):133-141



