

Trans Urethral Laser Ablation (TULA) treatment of reoccurring bladder tumours

This leaflet is for patients who have been recommended a TULA procedure for a suspected bladder tumour.

What is TULA?

TULA or trans urethral laser ablation is a flexible cystoscopy (an examination of the bladder using a camera on a thin flexible tube) that uses laser treatment to remove any reoccurring tumours or suspicious areas.

You can have TULA under local anaesthesia in Urology Procedures and in most cases, you should be able to go home the same day following the procedure.

TULA usually takes between 10 and 20 minutes to complete.

What are the risks or possible complications of TULA?

- Mild burning sensation while passing urine for a short period of time after the procedure.
- Infection in your bladder requiring antibiotic treatment.
- Delayed or on-going bleeding requiring further treatment, such as a catheter or even admission to hospital.
- Secondary bleeding can occur two or three weeks later and is often due to a bladder infection.

Preparation for TULA

There is no special preparation required, you can eat and drink as normal on the day of the procedure.

If you take anticoagulant medication (blood thinners) such as Warfarin or Clopidogrel, your urologist or clinic nurse will discuss whether it is necessary for you to reduce or stop these.

Please come for your appointment with a full bladder, because you will be asked to produce a urine sample when you arrive, prior to undergoing the procedure.

If the urine test results show any evidence of infection, the procedure will have to be postponed and rearranged once you are infection free.

What happens during TULA?

After your urine test has been reviewed and you have been deemed infection-free, you will be asked to undress into a hospital gown and lie down on a trolley.

You will be asked to wear a pair of laser protection glasses throughout the procedure.

A clinician will gently insert some anaesthetic jelly into your water passage (urethra) in order to pass a telescope, which is a fine flexible tube, to examine your bladder.

A small tissue sample (biopsy) may be taken to check for signs of malignancy. Then a laser fibre is passed through the telescope to treat the tumour or suspicious area.

The procedure is not usually painful.

After the procedure

You can go home immediately after the procedure.

Following the procedure, a letter will be sent to your GP informing him / her of the procedure, the outcome and the next appointment.

Advice following TULA

- You may have some discomfort and notice blood when passing urine, but this should settle within a couple of days and is quite normal after this procedure.
- Drink plenty of fluid – aim for at least two litres daily for two or three days following your procedure. This will dilute your urine and reduce any discomfort when you pass urine. It also helps to keep the bladder flushed, so that blood clots are less likely to develop and the urine continues to flow easily.
- Take paracetamol, following the dosage advice on the packet, if you have any discomfort.
- Try to stay active; this will help speed up your recovery.
- If you get any **pain or burning when you pass urine, or you feel unwell**, you may have a urine infection. Contact your GP as soon as possible.
- **Important: If you become shivery, have a fever and feel generally unwell, please go straight to the nearest Emergency Department (A&E) as you may need to be admitted for extra antibiotics given via a vein.**
- You can resume sexual activity when you feel comfortable

Results and follow-up appointment

If you have a biopsy during TULA, you will receive an appointment either in person or via telephone to go through the biopsy results within 3-4 weeks.

If you do not require a biopsy and just have laser ablation of a tumour, your next follow-up flexible cystoscopy / TULA will be agreed before you leave hospital.

During the first 24 hours following your discharge

If you have any further concerns about your surgery, the Urology Procedures Department can be contacted for advice on weekdays between 8.30am – 4.30pm via the Urology Clinical Admin Team 0118 322 8629. If you need help/advice outside these hours, then either call your GP or NHS 111. For emergencies only, telephone the hospital switchboard on 0118 322 5111 and ask to speak to the on call urology doctor for advice. If you have serious concerns, go to your nearest A&E. **After 24 hours, please seek advice from your GP.**

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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Next review due: February 2025

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