Prostate artery embolization (PAE) is a recently developed procedure to treat benign prostate hyperplasia (BPH) and alleviate urinary obstructive symptoms. During PAE, an interventional radiologist implants small beads in the blood vessels that supply the prostate gland, depriving it of blood supply and causing it to shrink.

Patients usually begin to experience improvement of BPH symptoms within a week after the procedure, with continued improvement over the next one to three months. Most patients experience a 25 to 40 percent shrinkage of the prostate. Prostate symptom scores show significant improvement, similar to that reported for TURP.

Although PAE is a relatively new treatment for BPH, the data on durability is promising. Most men whose symptoms improve after the embolization have continued to do well at one and three years after embolization, and the majority have continued to do well five years after embolization. While long-term data is not yet available, Dr. McWilliams points out that if BPH symptoms do return, the patient would still be a candidate for other urologic therapies, such as TURP and prostatectomy, or for re-embolization.

PAE is not yet FDA approved for BPH and is currently available at a limited number of centers, including UCLA. Not all insurances are currently reimbursing for PAE, but insurance coverage is expanding as more studies show the success of the treatment. “PAE is a safe and effective procedure and is a viable alternative to surgery in selected patients with severe symptomatic BPH,” states Dr. McWilliams.