High-intensity focused ultrasound (HIFU)

In this fact sheet:
- What is HIFU?
- Who can have HIFU?
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- What does HIFU involve?
- What are the side effects?

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This fact sheet is for men who are thinking about having high-intensity focused ultrasound (HIFU) to treat their prostate cancer. Your partner, family or friends might also find this information helpful. We describe how HIFU treats prostate cancer as well as the possible side effects.

Each hospital will do things slightly differently, so use this fact sheet as a general guide. Ask your doctor or nurse for more details about your treatment and the support available to you. You can also speak to our Specialist Nurses, in confidence, on 0800 074 8383.

What is HIFU?
High-intensity focused ultrasound (HIFU) uses high-frequency ultrasound energy to heat and destroy cancer cells in the prostate. A beam of ultrasound energy travels into the prostate from a probe put into the back passage (rectum).
Who can have HIFU?

HIFU might be suitable for you if your cancer is contained inside your prostate (localised prostate cancer).

It’s sometimes an option if your prostate cancer has started to break out of the prostate, or has spread to the area just outside the prostate (locally advanced prostate cancer).

It’s not an option if your cancer has spread outside your prostate to other parts of your body (advanced prostate cancer).

HIFU can also be used to treat cancer that has come back after radiotherapy (recurrent prostate cancer). This is called salvage HIFU.

HIFU is newer than some of the other treatments for prostate cancer, so we don’t know as much about the risk of side effects or how well it works in the long term (after 10 years). Because of this, it’s only available in specialist centres in the UK or as part of a clinical trial. Read more about clinical trials in our fact sheet, A guide to prostate cancer clinical trials.

HIFU isn’t available in every hospital. Talk to your doctor or nurse about whether it’s available in your area.

Other treatment options

If you have localised prostate cancer, your other treatment options may include:
• active surveillance
• watchful waiting
• surgery to remove the prostate (radical prostatectomy)
• external beam radiotherapy
• brachytherapy (a type of internal radiotherapy).

You may also be offered cryotherapy (using cold to freeze and destroy cancer cells). Like HIFU, cryotherapy is only available in specialist centres or as part of a clinical trial.

Read more in our Tool Kit fact sheet, Localised prostate cancer.

If you have locally advanced prostate cancer, your other treatment options may include:
• external beam radiotherapy with hormone therapy (and sometimes with high dose-rate brachytherapy)
• hormone therapy alone
• watchful waiting
• less commonly, surgery (radical prostatectomy).

Read more in our Tool Kit fact sheet, Locally advanced prostate cancer.

If your cancer has returned after radiotherapy, you may also be able to have cryotherapy, hormone therapy or, rarely, surgery (radical prostatectomy). Read more in our booklet, If your prostate cancer comes back: A guide to treatment and support.

You might not be able to have all of the treatments listed above. Read more about these treatments in our Tool Kit fact sheets.

Unsure about your diagnosis and treatment options?

If you have any questions about your diagnosis at any time, ask your doctor or nurse. They will explain your test results and talk you through your treatment options. Make sure you have all the information you need. We’ve got information about diagnosis and treatments in our fact sheets and booklets and on our website. And you can speak to our Specialist Nurses.

What are the advantages and disadvantages?

What may be an advantage for one person might not be an advantage for someone else. Talk to your doctor or nurse about your own situation. They can help you choose the right treatment for you.
Advantages

- You only need a short hospital stay – you can usually go home on the same day as your treatment.
- The recovery time is short – usually one or two weeks.
- HIFU doesn’t involve any cuts to the skin or needles, apart from a needle in your hand to give you a general anaesthetic.
- You may be able to have HIFU again if your cancer comes back after your first HIFU treatment. This isn’t the case with all treatments.
- You may also be able to have other treatments after HIFU if your cancer comes back, such as surgery or radiotherapy.

Disadvantages

- In the UK, HIFU is only available in specialist centres or as part of a clinical trial. It might not be available in a hospital near you.
- Compared with other treatments, we don’t know as much about the risk of side effects or how well it works in the longer term (after 10 years).
- As with other treatments, you may get side effects (see page 5).

What does HIFU involve?

There are two types of HIFU treatment. Whole-prostate HIFU treats the whole prostate. Focal HIFU treats a smaller area of the prostate. Read more about these on pages 4 and 5. And ask your doctor or nurse which type of treatment might be suitable for you.

Before your treatment

If you have a large prostate, you might be offered other treatments before you have HIFU.

- **Hormone therapy** is sometimes given for two to three months before HIFU. This can make the prostate smaller, and make the cancer easier to treat.
- **Transurethral resection of the prostate (TURP)** is an operation to remove prostate tissue and improve the flow of urine. This operation is sometimes used before HIFU to reduce the risk of some urinary problems after the treatment.

As with all treatments, these can cause side effects. Read more about these treatments and their possible side effects in our fact sheets, **Hormone therapy** and **Surgery for an enlarged prostate**.

If you’re having focal HIFU, you will usually go to a screening appointment first. You’ll have a magnetic resonance imaging (MRI) scan, which produces detailed images of the prostate and shows the location of the cancer. You may also have a prostate biopsy, which shows the location of the cancer and how likely the cancer is to grow and spread outside the prostate. These tests will help your surgeon target the area of the prostate that needs to be treated.

During your treatment

On the morning of your HIFU treatment, you’ll be given an enema to empty your bowels. This is a liquid that is put inside your back passage (rectum). You’ll also be asked not to eat or drink for around six hours before your HIFU.

You will have a general anaesthetic so that you’re asleep during the treatment. If you aren’t able to have a general anaesthetic for health reasons, you may be able to have a spinal (epidural) anaesthetic so that you can’t feel anything in your lower body. With this, you will also be given some medicine (a sedative) to make you sleepy.

During your treatment, you will either lie on your back with your legs apart or on your side with your knees brought up towards your chest. Ask your doctor or nurse which position you will be in.

You may have a catheter put in at the start of the treatment to drain urine out of your bladder. A catheter is a thin tube that is passed into your bladder, either through the penis or through the wall of your abdomen (stomach area).
Your surgeon will place a probe inside your back passage (rectum). The probe gives out a beam of high-intensity ultrasound energy, which travels through the wall of the back passage into the prostate. The beam treats one small area of the prostate at a time – the size of a grain of rice. Your surgeon will move the beam around so that it heats and destroys the cancer cells.

The probe also uses ultrasound to create images of the prostate while your surgeon is treating it. This helps the surgeon target the cancer so that less of the healthy tissue is damaged.

The probe is surrounded by a cooling balloon so that the heat doesn’t damage your back passage.

**Whole-prostate HIFU**
Whole-prostate HIFU treats the whole of the prostate and takes about three hours. It may be suitable for men who have cancer that needs treating in more than one area of their prostate.

Other men have another area of cancer in their prostate that is not treated on purpose (see diagram on page 5). This cancer is not treated because it is less likely to spread (low-risk cancer) and it may not cause any problems. These men will have regular tests to keep an eye on the cancer that is not treated.

"I had some cancer in my prostate that I wanted to do something about. I discussed HIFU with my doctor and it seemed like a good option for me."

A personal experience

Your surgeon will treat the areas of cancer that need treating and a small area around them. So less of the healthy tissue is damaged during focal HIFU compared to whole-prostate HIFU.

Some men who have focal HIFU have only one area of cancer in their prostate.

**Focal HIFU**
Focal HIFU treats a smaller area of the prostate and takes one to two hours. It may be suitable for men who have cancer that needs treating in only one area of their prostate.
With focal HIFU, there is a small risk that some areas of cancer that do need treating may be missed because it doesn’t treat the whole prostate. If this happens, there are further treatments that you can have which aim to get rid of or control the cancer (see page 8).

**After your treatment**

You should be able to go home on the same day as your treatment. Your doctor or nurse will check that you’ve recovered from the anaesthetic and are fit to go home.

You may have pain in the area between your testicles and back passage, but you’ll be given pain-relieving drugs to take at home.

You will also get antibiotics to prevent any possible infection and may be given a medicine called a laxative to help you empty your bowels.

HIFU usually causes the prostate to swell to begin with, which can make it difficult to urinate. You’ll have a catheter to drain urine from your bladder until the swelling has gone, usually for up to a week after treatment.

Before you go home your doctor or nurse will show you how to look after your catheter. They’ll also give you an appointment to have your catheter removed.

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**What are the side effects?**

Like all treatments, HIFU can cause side effects. These will affect each man differently, and you might not get all of them.

The most common side effects are urinary problems and difficulty getting or keeping an erection (erectile dysfunction).

You’re more likely to get side effects if you have more than one HIFU treatment or if you’ve had other treatments for prostate cancer before HIFU. This is because your first treatment may have already damaged the area around your prostate.

Less of the healthy tissue is damaged during focal HIFU than whole-prostate HIFU so some experts believe it may cause fewer side effects than whole-prostate HIFU. But we need more research before we know if there is a difference in the risk of side effects.

Remember, if you have hormone therapy or a TURP before you have HIFU, these can also cause side effects. Read more about these side effects in our fact sheets, **Hormone therapy** and **Surgery for an enlarged prostate**.

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**Questions about side effects**

Ask your doctor or nurse for more information about your risk of side effects. They may be able to show you results of treatments they’ve carried out and put you in touch with other men who’ve had HIFU.

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I asked my surgeon about the risk of side effects with HIFU. It made me feel prepared and reassured.

*A personal experience*
Short-term side effects
These can develop soon after your treatment and may include:
• blood or tissue in your urine
• erection problems
• urine infections
• urinary problems
• testicle infections.

Blood or tissue in your urine
You might see some blood in your urine while the catheter is in place. You might also see some small pieces of prostate tissue in your urine for six to eight weeks after HIFU. This is normal. If you are worried or see signs of an infection (see below), speak to your doctor or nurse straight away.

Erection problems
Some men have problems getting or keeping an erection (erectile dysfunction) after HIFU. This is because it can damage the blood vessels and nerves that control erections. For some men this will improve, but for others this will be a longer-term side effect of the treatment (see below). There are treatments that can help with erection problems.

Urine infections
Some men get a urine infection after HIFU. Signs of a possible urine infection include:
• a fever (high temperature)
• a burning sensation when you urinate
• dark or cloudy urine with a strong smell
• needing to urinate more often than usual.

Tell your doctor or nurse if you have any signs of a urine infection. They’ll usually give you antibiotics to treat the infection.

Urinary problems
Some men find it hard to empty their bladder properly after their catheter is removed – this is called urine retention. This is because HIFU can cause the prostate to swell and block the urethra, which is the tube you urinate through. If your flow of urine is weak or slow after your catheter is taken out, speak to your doctor or nurse.

If you can’t urinate at all, call your doctor or nurse straight away or go to your nearest accident and emergency (A&E) department. They may need to drain your bladder using a catheter.

They might also suggest using a temporary catheter (self-catheterisation) until the swelling has gone. This is where you put a catheter in yourself when you want to urinate and take it out afterwards. Some men find that urinary problems improve over time but other men have longer-term problems (see below).

Testicle infections
Some men get an infection in the testicles or the tubes that carry sperm from the testicles. Signs of a possible infection include pain, swelling and tenderness in one or both testicles. Tell your doctor or nurse if you have any of these symptoms. They’ll usually give you antibiotics to treat the infection.

Longer-term side effects
Most side effects will settle down after HIFU, but some men have longer-term side effects or problems that develop later, including:
• sexual problems
• urinary problems
• a hole between the back passage and the urethra (rectal fistula).

Sexual problems
Some men get erection problems that improve over time, but other men find that their erection problems don’t improve. There are treatments that can help manage erection problems.

You should still be able to orgasm (climax), but you might release less semen (the fluid that carries sperm), or no semen at all. This means you may not be able to have children naturally after treatment. If you’re planning to have children, you might be able to store your sperm before HIFU to use in fertility treatment. If this is important to you, ask your doctor or nurse about it.

You may find that when you orgasm, the semen travels backwards into the bladder rather than out through the penis. The semen is then passed out of the body when you next urinate.
This is called retrograde ejaculation. This is more common if you’ve had a TURP before HIFU. It isn’t harmful and shouldn’t affect your enjoyment of sex, but it might feel different to the orgasms you’re used to.

Talk to your doctor or nurse if you have problems with erections or other sexual problems. They can explain your treatment options and arrange free treatment on the NHS. They can also refer you to an erectile dysfunction (ED) clinic.

Read more about this in our booklet, Prostate cancer and your sex life. You can also call our Specialist Nurses.

**Urinary problems**

HIFU can cause longer-term urinary problems. You may have some of the following problems straight after treatment, or they might develop some time later.

- Some men leak urine (urinary incontinence) after HIFU. This is more likely if you’ve already had external beam radiotherapy.

- You may leak urine when you cough, sneeze or exercise (stress incontinence).

- If your urethra, which is the tube you urinate through, or the opening of your bladder becomes narrow (a stricture), you may find it difficult to empty your bladder.

- Some men need to urinate more often than usual (frequency).

- You may have a sudden urge to urinate (urgency).

Talk to your doctor or nurse if you have any urinary problems. There are things that can help, including lifestyle changes, pelvic floor muscle exercises and treatments. Your doctor or nurse may also refer you to an NHS continence service, run by nurses and physiotherapists who specialise in urinary problems.

Read more about urinary problems and how to manage them in our Tool Kit fact sheets, Urinary problems after prostate cancer treatment and Pelvic floor muscle exercises. You can also speak to our Specialist Nurses.

A hole between the back passage and the urethra (rectal fistula)

Very rarely, HIFU can cause a hole between the back passage (rectum) and the urethra, which is the tube you urinate through. This is called a rectal fistula. It affects fewer than 1 in 100 men who have whole-prostate HIFU (1 per cent). It is slightly more likely if you’ve already had radiotherapy.

Signs of a possible rectal fistula include:

- urine coming out of your back passage
- pain in your pelvis or back passage
- bowel contents in your urine
- air bubbles in your urine
- urine infections, although these can be caused by other things.

Talk to your doctor or nurse straight away if you think you may have a rectal fistula. If you develop a fistula, you will need an operation to repair the hole.

**What happens afterwards?**

You will have check-ups with your doctor or nurse at the hospital at first, and then with your GP. This is often called follow-up.

The aim is to:

- check how your cancer has responded to treatment
- deal with any side effects of treatment
- give you a chance to raise any concerns or ask any questions.

You will have PSA tests every three to six months for the first few years to check how well the HIFU has worked. The PSA test is a blood test that measures the amount of a protein called prostate specific antigen (PSA) in your blood.
Your PSA is likely to reach its lowest level a few months after HIFU. You may also have a prostate biopsy or MRI scan after treatment to check your prostate cancer has been treated.

If you have focal HIFU, you might have low-risk cancer in another area of the prostate that is not treated on purpose (see page 4). You will have regular tests to monitor the cancer that is not treated. These might include PSA tests, MRI scans and prostate biopsies.

A continuous rise in your PSA level can be a sign that the cancer has come back. If your cancer does come back, your doctor or nurse will talk with you about further treatment options.

You might also have other tests, such as a CT scan, MRI scan or bone scan, to see if the cancer has spread to other parts of your body.

If your cancer does come back after HIFU, you may be able to have further treatments that aim to get rid of it or control it. You may be offered more HIFU, external beam radiotherapy, cryotherapy, surgery (radical prostatectomy), or hormone therapy. Or your doctor may suggest monitoring your cancer, rather than treating it straight away.

There is no right way to feel and everyone reacts differently. There are things you can do to help yourself and people who can help.

**How can I help myself?**
Find out about your treatment, so you know what to expect and what your options are. And ask about any side effects so you know what to expect and how to manage them.

Set yourself goals and things to look forward to. Be as active as you can and eat a healthy, balanced diet.

Find someone you can talk to. This could be someone close or a counsellor. Read more in our booklet, *Living with and after prostate cancer: A guide to physical, emotional and practical issues.*

I think treatment and side effects affect men psychologically more than we realise. We don’t always like to talk about it but everyone’s thinking about it.

*A personal experience*

**Who can help?**

*Your medical team*
Speak to your nurse, doctor, GP or anyone in your medical team. They can explain your diagnosis, treatment and side effects, listen to your concerns, and put you in touch with others who can help.

*Our Specialist Nurses*
Our Specialist Nurses can answer your questions and explain your diagnosis and treatment options. They’ve got time to listen to any concerns you or those close to you have in confidence.

*Trained counsellors*
Many hospitals have specialist counsellors for people with cancer – ask your doctor or nurse at
the hospital if this is available. Your GP can also refer you or you can see a private counsellor.

**Our one-to-one support service**

Our one-to-one support service is a chance to speak to someone who’s been there. They can share their experiences and listen to yours. You can discuss whatever’s important to you.

**Our online community**

Our online community is a place to deal with prostate cancer together. You can talk about whatever’s on your mind. Anyone can ask a question or share an experience.

**Local support groups**

At local support groups men get together to share their experiences of prostate cancer. You can ask questions, share worries or talk about what you are going through. Many groups also welcome friends and family.

To find out more about any of the above, visit prostatecanceruk.org/get-support or call our Specialist Nurses on 0800 074 8383.

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**Questions to ask your doctor or nurse**

You may find it helpful to keep a note of any questions you have to take to your next appointment.

**What are the advantages and disadvantages of HIFU?**

**Where is this treatment available?**

**Can I see the results of HIFU treatments you have carried out?**

**What are my other treatment options?**
Will I have focal HIFU or whole-prostate HIFU?

What are the side effects of HIFU? How likely am I to get them?

How can I manage any side effects I get?

What is my risk of getting a rectal fistula? What will happen if I do get one?

How will I know if the treatment has worked?

How likely is it that I’ll need more treatment after HIFU?

What treatments are available after HIFU?
More information

Bladder and Bowel UK
www.bladderandboweluk.co.uk
Telephone: 0800 031 5412
Impartial information and advice about bladder and bowel problems.

British Association for Counselling & Psychotherapy
www.itsgoodtotalk.org.uk
Telephone: 01455 88 33 00
Information about counselling and details of therapists in your area.

Cancer Research UK
www.cancerresearchuk.org
Telephone: 0808 800 4040
Patient information from Cancer Research UK. Includes a database of some clinical trials and advice on finding a trial.

Macmillan Cancer Support
www.macmillan.org.uk
Telephone: 0808 808 00 00
Practical, financial and emotional support for people with cancer, their family and friends.

Maggie’s Centres
www.maggiescentres.org
Telephone: 0300 123 1801
A network of drop-in centres for cancer information and support. Includes an online support group.

National Institute for Health and Care Excellence (NICE)
www.nice.org.uk
Guidelines for care and for the use of treatments and procedures on the NHS in England. Includes guidelines for HIFU and focal HIFU.

About us

Prostate Cancer UK has a simple ambition: to stop men dying from prostate cancer – by driving improvements in prevention, diagnosis, treatment and support.

This fact sheet is part of the Tool Kit. You can order more Tool Kit fact sheets, including an A to Z of medical words, which explains some of the words and phrases used in this fact sheet.

Download and order our fact sheets and booklets from our website at prostatecanceruk.org/publications or call us on 0800 074 8383.

At Prostate Cancer UK, we take great care to provide up-to-date, unbiased and accurate facts about prostate cancer. We hope these will add to the medical advice you have had and help you to make decisions. Our services are not intended to replace advice from your doctor.

References to sources of information used in the production of this fact sheet are available at prostatecanceruk.org

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- Our Specialist Nurses
- Our Volunteers.
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Did you find this information useful? Would you like to help others in your situation access the facts they need? Every year, 40,000 men face a prostate cancer diagnosis. Thanks to our generous supporters, we offer information free to all who need it. If you would like to help us continue this service, please consider making a donation. Your gift could fund the following services:

- £10 could buy a Tool Kit – a set of fact sheets, tailored to the needs of each man with vital information on diagnosis, treatment and lifestyle.
- £25 could give a man diagnosed with a prostate problem unlimited time to talk over treatment options with one of our Specialist Nurses.

To make a donation of any amount, please call us on 0800 082 1616, visit prostatecanceruk.org/donate or text PROSTATE to 70004†.

There are many other ways to support us. For more details please visit prostatecanceruk.org/get-involved

† You can donate up to £10 via SMS and we will receive 100% of your donation. Texts are charged at your standard rate. For full terms and conditions and more information, please visit prostatecanceruk.org/terms

Like us on Facebook: Prostate Cancer UK
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Call our Specialist Nurses from Monday to Friday 9am - 6pm, Wednesday 10am - 8pm
* Calls are recorded for training purposes only.
Confidentiality is maintained between callers and Prostate Cancer UK.

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