AQUABLATION® THERAPY

WATER III: Aquablation vs. Transurethral Laser Enucleation of Large Prostates (80-180mL) in Benign Prostatic Hyperplasia

Ritter et al. 2025 EAU Abstract Presentation

OBJECTIVES

Determine the safety and efficacy outcomes after Aquablation therapy vs. transurethral laser enucleation of the prostate (LEP) for the treatment of large prostates (80-180mL).

DETAILS

Germany
United Kingdom

98 Aquablation
88 LEP

5 centers

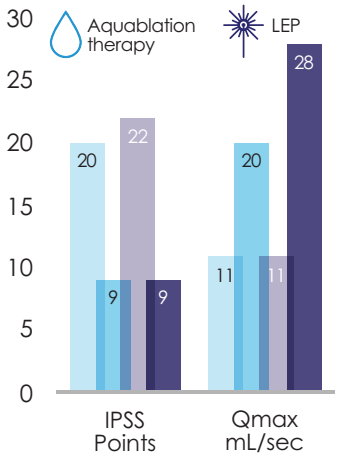
80-180mL

METHODS

- Investigator initiated, prospective, randomized and non-randomized trial
- Primary efficacy endpoint was the reduction in IPSS
- Primary safety endpoint was the occurrence of Clavien-Dindo (CD) ≥ grade 2 or persistent grade 1 Adverse events (AE) such as ejaculatory or erectile dysfunction or urinary incontinence

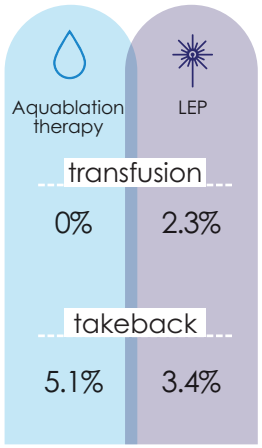
RESULTS

efficacy



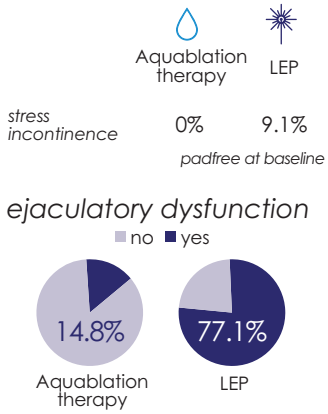
at 3 months

safety



at 3 months

functional



at 3 months

durability

No retreatments reported

5-year follow-up planned

at 3 months

AUTHOR CONCLUSIONS

Aquablation and LEP had no difference in short-term symptom improvement, bleeding risk, and PVR reduction. LEP was superior to Aquablation in volume reduction and urinary flow improvement. Aquablation was superior to LEP in lower ejaculatory dysfunction and stress incontinence.

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