Benign prostatic hyperplasia (BPH) is an extremely common and costly condition that affects older men worldwide. BPH can be diagnosed in about 50 percent of men between the ages of 51 and 60, and up to 90 percent of men over 80 in the United States. Most of men with BPH suffer from lower urinary tract symptoms (LUTS).

Symptoms of BPH are divided into 2 categories - obstructive and irritable. Not everyone with BPH has all of these symptoms, and they do not affect everyone to the same extent.
The main thing is that everyone should know that BPH does not increase the risk of developing prostate cancer. Therefore, BPH isn't even considered a health problem unless it causes symptoms. Prostate enlargement or BPH is usually a non-life-threatening condition, so men with enlarged prostate and no-symptoms must not be prescribed with medications or surgeries that can develop serious health related problems.

According to guidelines for doctors, men with BPH with bothering symptoms must stay away from risky medical or surgical interventions, in so called "watchful waiting".

A recent article: "In the guidelines for physicians and urologists "watchful waiting" for benign prostatic hyperplasia (BPH) should be replaced with Thermobalancing therapy that treats prostate effectively, cost-effectively and safely" is published in the medical journal states that treatment with Dr Allen's device that enables Thermobalancing therapy should be carried out at an early stage of this disorder.

1. Conventional medical and surgical treatments of BPH are risky and costly

BPH drugs and surgeries may cause serious adverse
events and complications, such as sexual dysfunction, depression, weakness, retrograde ejaculation, impotence and diabetes. As a result of these new problems, men become depressed, which significantly reduces their quality of life.

Physicians and urologists prescribe 2 types of medications to men with BPH: alpha-blockers such as: tamsulosin, terazosin, doxazosin, and alfuzosin; or 5-alpha-reductase inhibitors, such as finasteride and dutasteride, Avodart and Proscar; or both of these drugs. The use of this drugs has serious side effects such as weakness, retrograde ejaculation, impotence and diabetes. Moreover, four-year study shows that men who took dutasteride (Avodart), for BPH, were less likely to be diagnosed with prostate cancer, however, men taking dutasteride who did develop prostate cancer were more likely to have deadlier tumors.

Two articles published recently reveal, the medical and surgical costs of BPH over time, but had different conclusions. Thus, one article, "Medical therapy versus transurethral resection of the prostate (TURP) for the treatment of symptomatic benign prostatic enlargement (BPE): a cost minimisation analysis," concluded that BPH medical management was more cost saving than
TURP. However, another article "Pharmacotherapy vs surgery as initial therapy for patients with moderate-to-severe benign prostate hyperplasia: a cost-effectiveness analysis: stated that surgery is cost-effective as initial therapy for BPH.

Thus, conventional treatments of BPH have side effects reducing men's quality of life of men and, moreover, costly, so they should only be accepted as the treatment of last resort.

2. Effectiveness and cost-effectiveness of Thermobalancing therapy with Dr Allen's therapeutic device

BPH medicine and surgeries are promoted by big businesses, while innovative Thermobalancing therapy and Dr Allen's device is introduced by small company Fine Treatment. It should be noted that Thermobalancing therapy and therapeutic device has received a US patent only a few years ago.

And this novel therapy provides is enabled by cost-effective Dr Allen's Device that with the price less than $US 200 compares favourably with all others treatment options for prostate enlargement or BPH. At the same time annual costs related to BPH medical treatment ca
reach $US 2,000, and surgical interventions can cost $US 10,000 and more.

A new understanding of the cause of BPH shows that prostate enlargement starts at the vascular level. The article in the Aging men journal: "Use of Thermobalancing therapy in ageing male with benign prostatic hyperplasia with a focus on etiology and pathophysiology," states that the process of enlargement depends on pathological change in the smallest blood vessels, namely capillaries.

A clinical study on Thermobalancing therapy in 124 men with BPH demonstrates that Dr Allen's Device decreases LUTS and improves quality of life by eliminating problems at the vascular level in the affected prostate tissue stopping prostate enlargement.

As Dr Allen's Device is a Class I Medical Device everyone can use it at home without worrying, as this treatment is harmless.

3. Thermobalancing therapy should be prescribed in "watchful waiting"

Most men complain about urination problems to physicians, who are the first instance for men with LUTS associated with BPH, so it is important for them to
clearly understand what to do.

Therefore, doctors should know about innovative Thermobalancing therapy and administrate it to men when the enlarge prostate is diagnosed.

Thus, Dr Allen's therapeutic device should be the first-line treatment, prescribed instead "watchful waiting", and there is no reason to postpone this turn.

For over a decade Fine Treatment delivers the innovative device for prostate treatment to anyone's home in a week

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