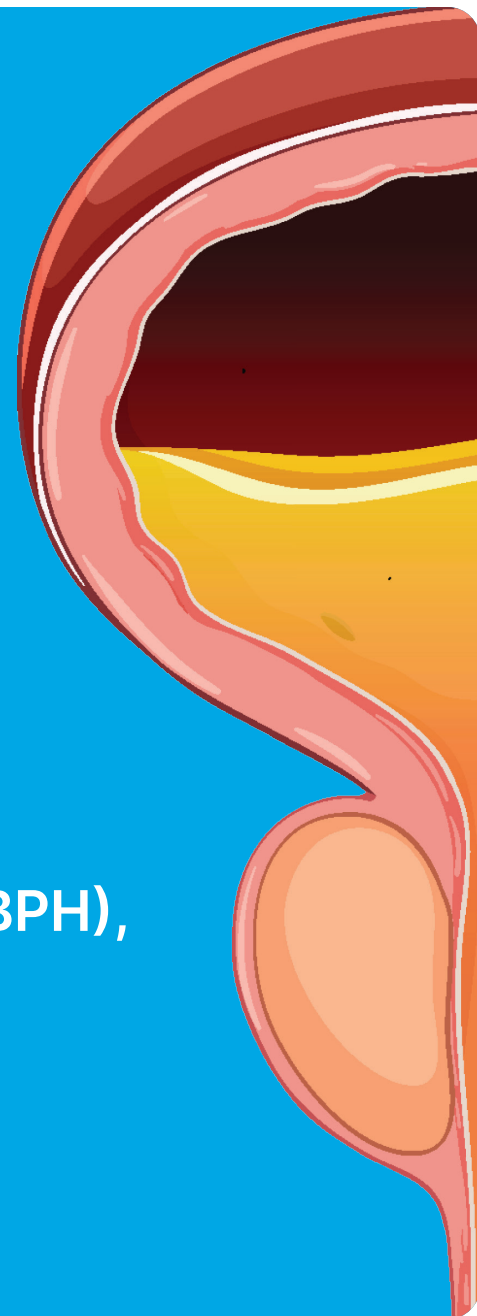


Your Enlarged Prostate Health Guide

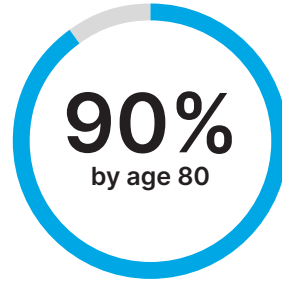
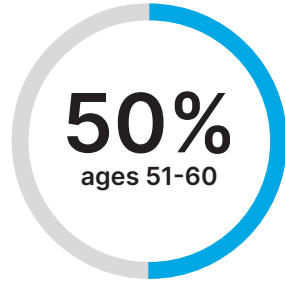
**There are some things you
shouldn't just get used to.**

Understanding benign prostatic hyperplasia (BPH),
your bladder, and your treatment options.



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How common is an enlarged prostate?



Source: American Urological Association, Management of Lower Urinary Tract Symptoms Attributed to Benign Prostatic Hyperplasia (BPH): Guideline.

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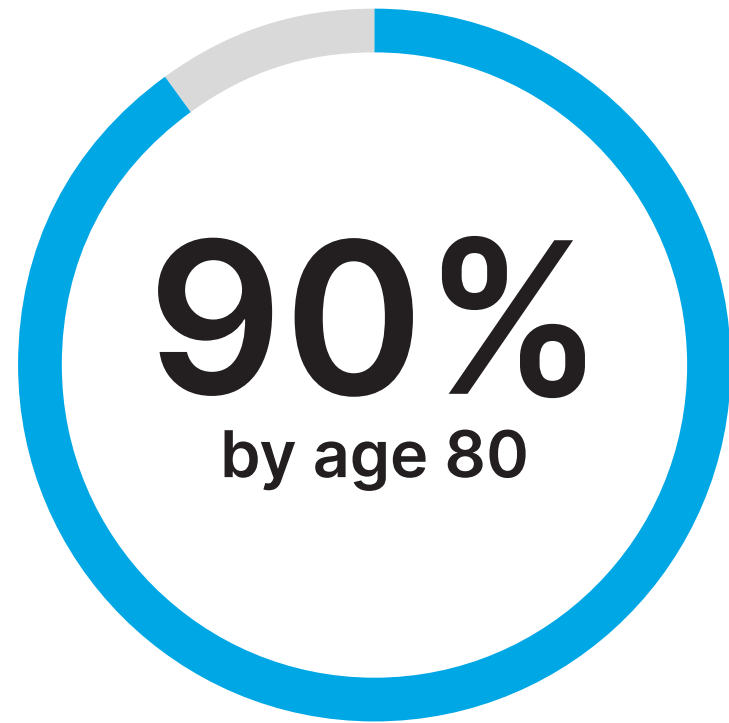
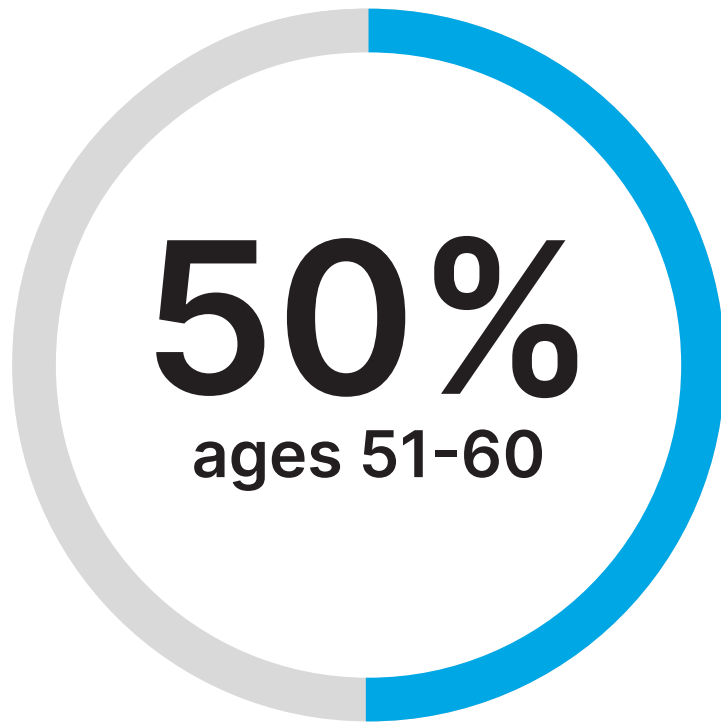
Provider considerations:

- You are not alone
- About half of men in their 50s have an enlarged prostate
- As men age, the prostate grows
- Nearly all men have an enlarged prostate by age 80

▲
Patient-facing

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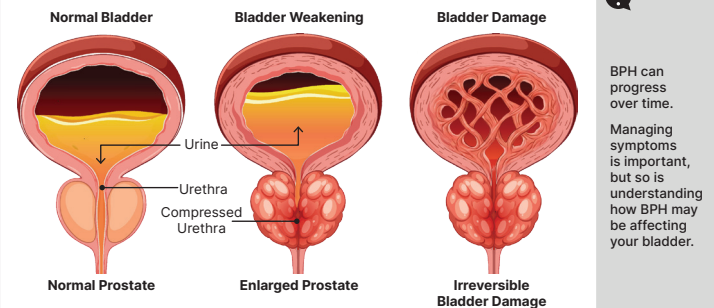
How common is an enlarged prostate?



Source: American Urological Association. Management of Lower Urinary Tract Symptoms Attributed to Benign Prostatic Hyperplasia (BPH): Guideline.

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What exactly is an enlarged prostate, or benign prostatic hyperplasia (BPH)?



Source: Johns Hopkins Medicine. Benign Prostatic Hyperplasia (BPH). Accessed 2026.

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▲
Patient-facing

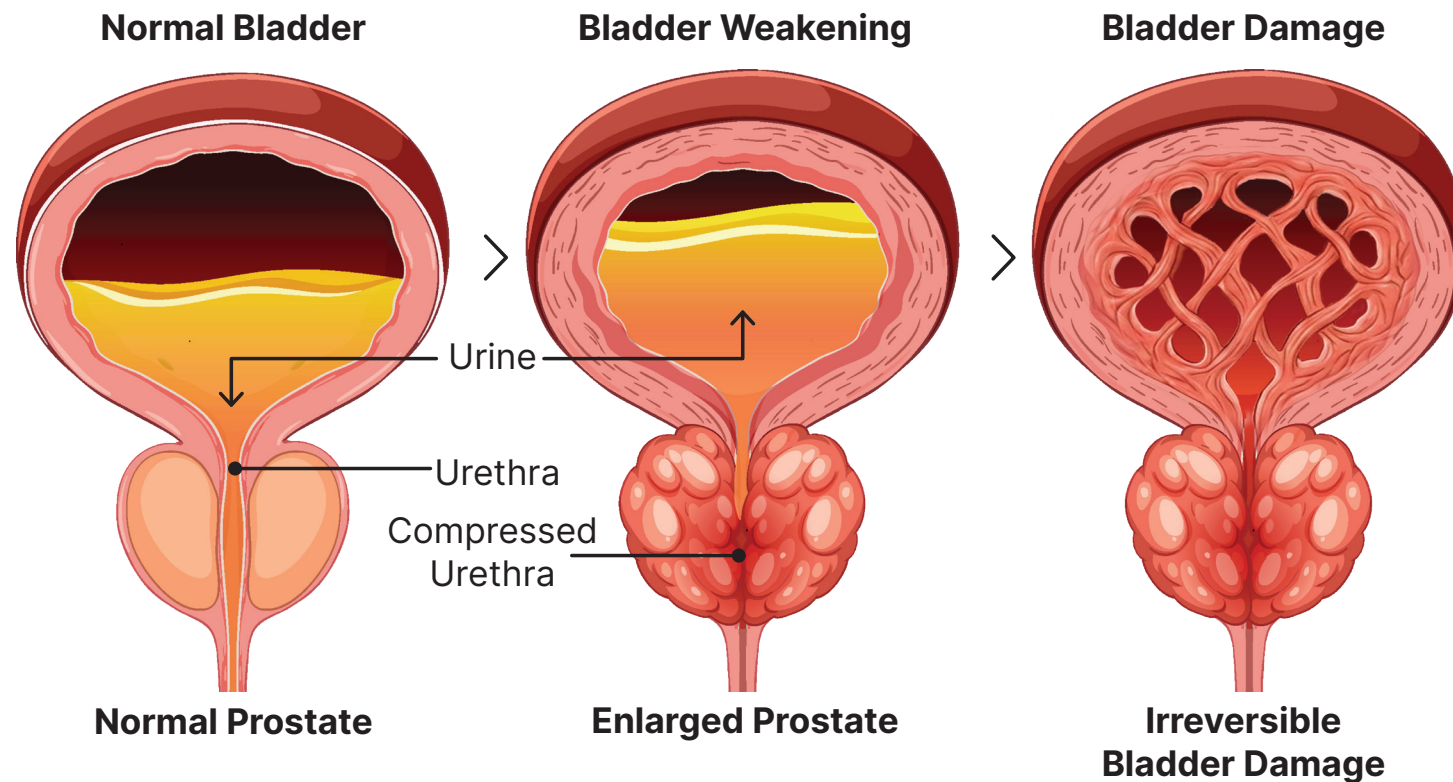


Provider considerations:

- As men age the prostate tissue continues to grow
- As the prostate grows, it presses against the urethra — the tube that carries urine out
- The bladder must push harder just to empty itself.
- As BPH worsens, your bladder may work harder, causing the bladder to weaken and symptoms to worsen.

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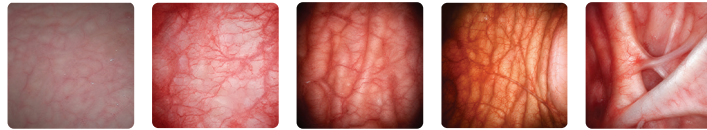
What exactly is an enlarged prostate, or benign prostatic hyperplasia (BPH)?



BPH can progress over time.

Managing symptoms is important, but so is understanding how BPH may be affecting your bladder.

Why does bladder health matter?



Healthy

Irreversible Damage

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▲
Patient-facing

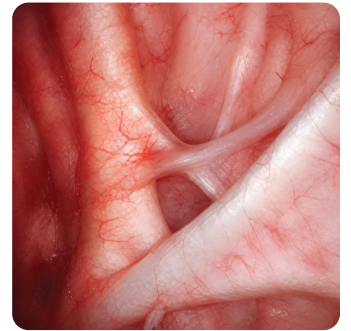
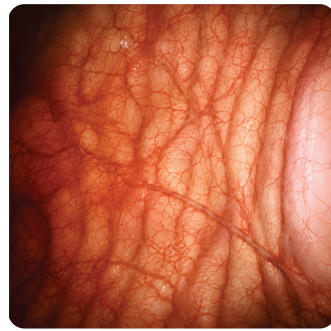
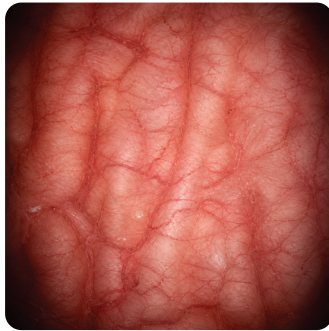
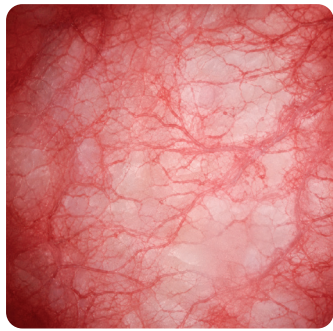


Provider considerations:

- BPH can be more than a prostate issue—it can potentially impact bladder health over time
- Chronic obstruction places increased pressure on the bladder, causing it to work harder over time
- Symptoms may not always reflect the degree of bladder dysfunction
- We can look at your bladder to assess health

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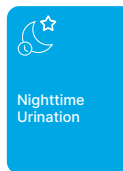
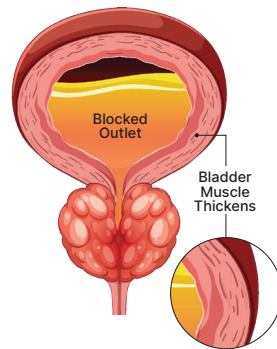
Why does bladder health matter?



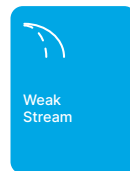
Healthy

Irreversible Damage

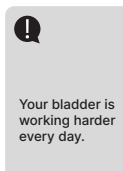
Why am I having these symptoms?



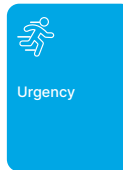
Nighttime Urination



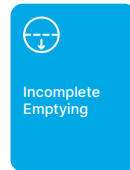
Weak Stream



Your bladder is working harder every day.



Urgency



Incomplete Emptying

Source: Johns Hopkins Medicine. Benign Prostatic Hyperplasia (BPH). Accessed 2026.

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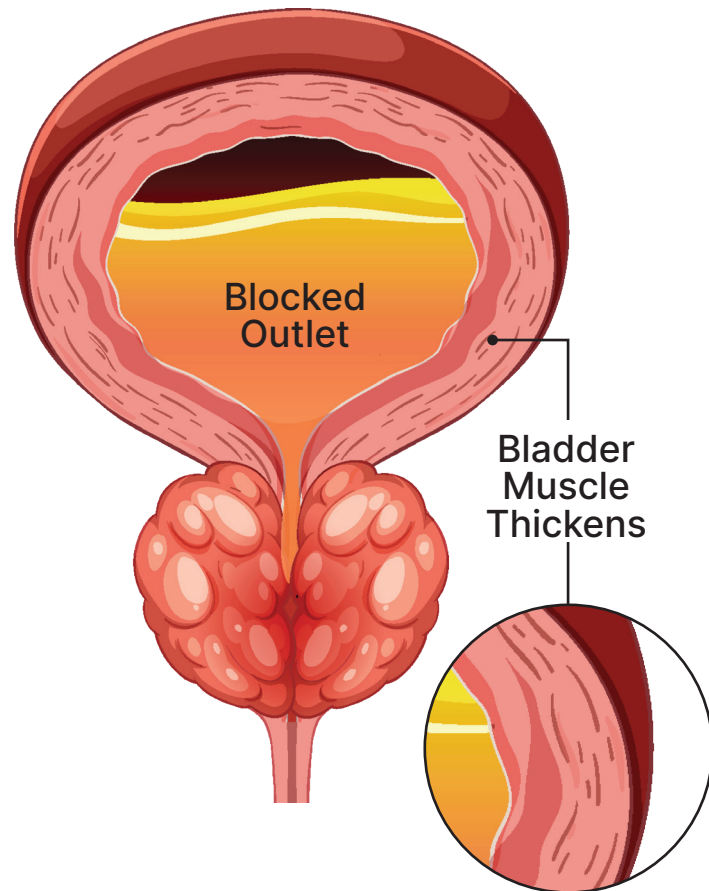
Provider considerations:

- Symptoms may include getting up more often at night, weak stream, urgency, and the feeling of incomplete emptying
- While these start as bothersome symptoms, over time they can progress to more serious issues

▲
Patient-facing

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Why am I having these symptoms?



Nighttime
Urination



Weak
Stream



Your bladder is
working harder
every day.

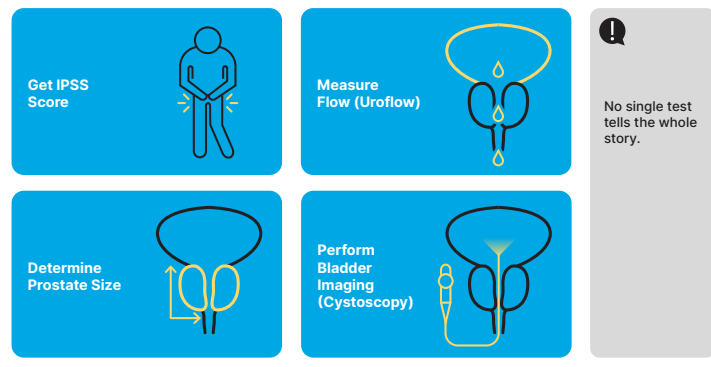


Urgency



Incomplete
Emptying

How do we know how severe my BPH is?



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Patient-facing



Provider considerations:

- To better understand your BPH, we conduct several diagnostic tests
- The IPSS score helps us understand how bothered you are by your symptoms
- A urine flow test helps us understand the amount of urine let out and flow rate
- Sizing helps us determine the size of your prostate which helps determine which treatment options are appropriate for you
- A bladder imaging scan, also called a cystoscopy, helps us look directly at your bladder to assess the health of your bladder

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How do we know how severe my BPH is?

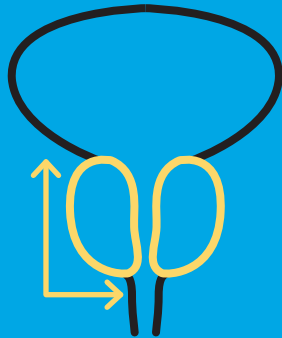
Get IPSS Score



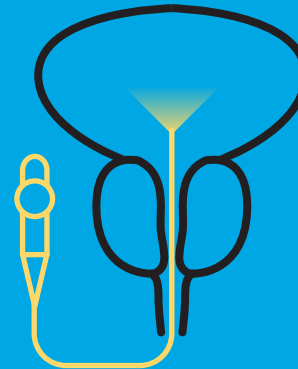
Measure Flow (Uroflow)



Determine Prostate Size



Perform Bladder Imaging (Cystoscopy)



No single test tells the whole story.

Are my medications still working?

What medications **CAN** do:

- ✓ Improve symptoms
- ✓ Relax muscles
- ✓ Slow growth (some medications)

What medications **CANNOT** do:

- ✗ Remove tissue causing the blockage
- ✗ Restore normal urine flow
- ✗ Prevent every patient from needing a procedure over time



Are you controlling your symptoms, or treating the cause?

Are you having any of these side effects?

- Dizziness
- Changes to mood
- Fatigue
- Low sex drive
- Changes in erections or ejaculation



Sources: Johns Hopkins Medicine, Benign Prostatic Hyperplasia (BPH). Accessed 2026; Cindolo L, et al. PMC. 2015; Bortnick EM, et al. Rev Urol. 2019.

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Provider considerations:

- Medications can help manage symptoms but don't treat the underlying cause of the blockage
- Discuss with patient their symptom relief and any side effects of the medications

▲
Patient-facing

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Are my medications still working?

What medications CAN do:

- ✓ Improve symptoms
- ✓ Relax muscles
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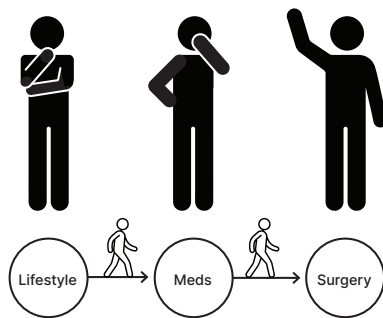
Are you controlling your symptoms, or treating the cause?

Are you having any of these side effects?

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When is it time to consider a procedure?



Questions to ask yourself:

- Are symptoms worsening?
- Still waking multiple times?
- Planning life around bathrooms?
- Taking medication but not satisfied?

Review results of diagnostic tests to understand severity and treatment options.

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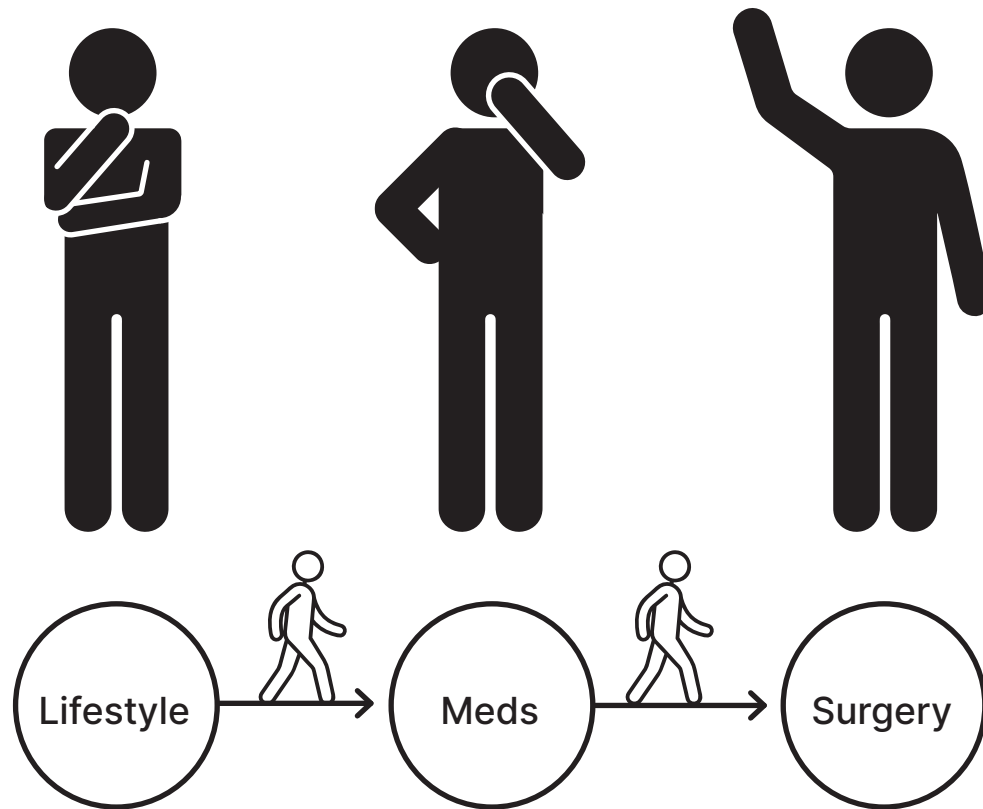
Provider considerations:

- There are many options to manage your BPH symptoms and treat the underlying cause
- Discuss these questions with the patient and review their diagnostic test results

▲
Patient-facing

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When is it time to consider a procedure?

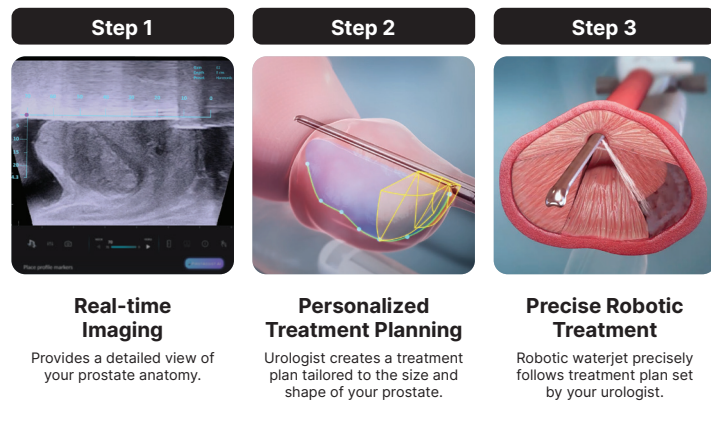


Questions to ask yourself:

- Are symptoms worsening?
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How does Aquablation work?



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Provider considerations:

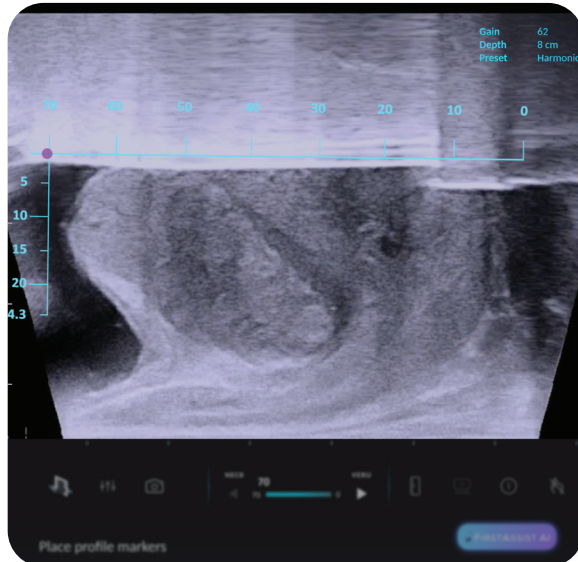
- Aquablation therapy is a robotic waterjet procedure for enlarged prostate
- It is designed for long-lasting relief, while protecting what matters most
- Review the three pillars of Aquablation

▲
Patient-facing

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How does Aquablation work?

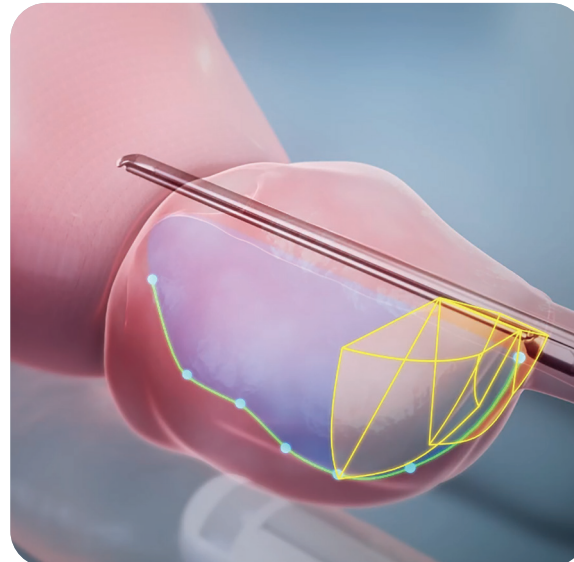
Step 1



Real-time Imaging

Provides a detailed view of your prostate anatomy.

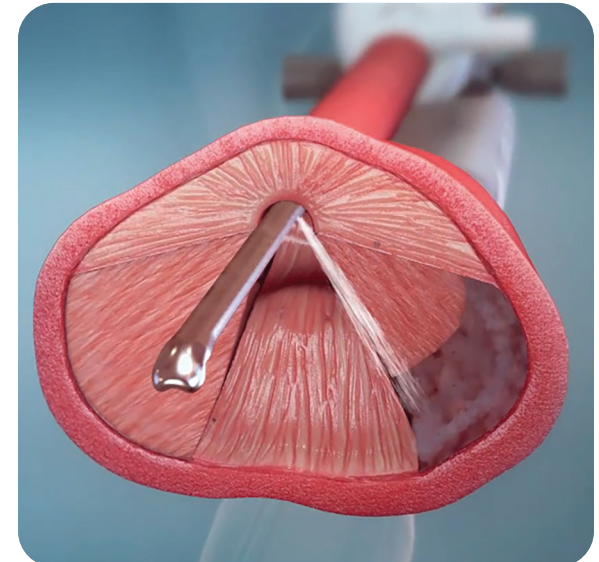
Step 2



Personalized Treatment Planning

Urologist creates a treatment plan tailored to the size and shape of your prostate.

Step 3



Precise Robotic Treatment

Robotic waterjet precisely follows treatment plan set by your urologist.

Aquablation: Results proven over time.

Published clinical outcomes across the areas patients say matter most.



Significant Symptom Relief

Symptom
improvement
from **severe**
to **mild**¹

94%
of men retained
less urine⁴



Likelihood of Needing Another Procedure

94%
of patients
did not need
a secondary
procedure at
5 years²



Preservation of Sexual Function

99%
of patients
preserved
erectile
function^{1,3} and
85%
preserved
ejaculatory
function⁴



Preservation of Bladder Control

99%
of patients
preserved
bladder
control^{1,3}



Recovery Time and Ease

Patients often
go home same-
day and have
a catheter for
1-3 days after
surgery^{5,6}

Sources: (1) Gilling PJ, et al. Can J Urol. 2022; (2) Berjauli M, et al. BJU International 2024; (3) Efterman D, et al. BMJ Surg Interv Health Technol 2021; (4) Data on file; (5) Mahamati et al., Urology, 2026; (6) Ng et al., BJU Int., 2024.

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Provider considerations:

- Review published outcomes
- Discuss specific expectations from the provider and practice

▲
Patient-facing

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Aquablation: Results proven over time.

Published clinical outcomes across the areas patients say matter most.



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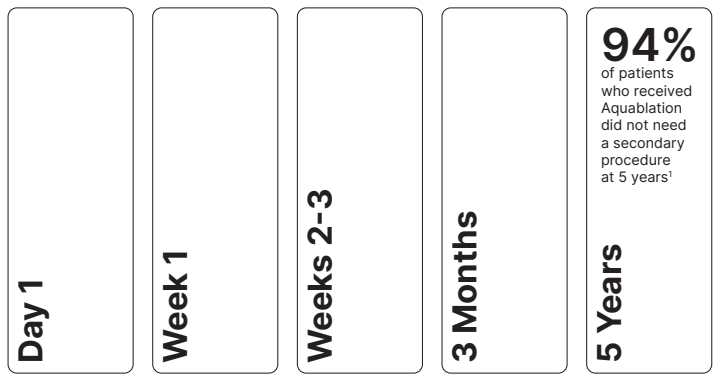
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What should I expect after treatment?



Source: Benjaoui M, et al. BJU International 2024

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▲
Patient-facing



Provider considerations:

- Most patients go home the same day (some stay overnight).
- Expect a catheter for 1–3 days.
- You'll likely notice symptom improvement quickly, with continued improvement over the next 6–12 weeks.
- Burning with urination and some blood are common during the first few weeks as you heal.
- Most healing and expected symptom improvement occur by about 3 months.
- If your bladder has been working against the blockage for a long time, it may take additional time to adjust after surgery.
- Share typical post-operative experiences from other patients, as appropriate.

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What should I expect after treatment?

Day 1

Week 1

Weeks 2-3

3 Months

5 Years

94%

of patients who received Aquablation did not need a secondary procedure at 5 years¹

Questions to ask before you leave.

- | | |
|--|---|
| ☐ What are my options to treat my enlarged prostate beyond medications? | ☐ How likely is it I'll need another procedure? |
| ☐ Does this remove the tissue causing the blockage? | ☐ What are the risks to erections and ejaculation? |
| ☐ How much improvement can I expect? | ☐ What are the risks to continence? |
| ☐ Will this reduce strain on my bladder? | |



Scan to
follow-up

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Provider considerations:

- Discuss questions with the patient and answer any remaining questions they may have

▲
Patient-facing

AQUABLATION[®]
THERAPY

Questions to ask before you leave.

- ☐ What are my options to treat my enlarged prostate beyond medications?
- ☐ Does this remove the tissue causing the blockage?
- ☐ How much improvement can I expect?
- ☐ Will this reduce strain on my bladder?
- ☐ How likely is it I'll need another procedure?
- ☐ What are the risks to erections and ejaculation?
- ☐ What are the risks to continence?



**Scan to
follow-up**



Learn more at
www.aquablation.com

Risk and Safety Information

All surgical treatments have inherent and associated side effects, some of which may lead to serious outcomes and may require intervention. Individual's outcomes may depend on a number of factors, including but not limited to patient characteristics, disease characteristics and/or surgeon behavior. The most common side effects are mild and transient and may include mild pain or difficulty when urinating, discomfort in the pelvis or penis, blood in the urine, inability to empty the bladder or a frequent and/or urgent need to urinate, and bladder or urinary tract infection. Other risks include but are not limited to: anesthesia risk; sexual dysfunction, including ejaculatory or erectile dysfunction; injury to the urethra, such as false passage or stricture, or to the rectum, including rectal incontinence / perforation; bladder or prostate capsule perforation; infection, including the potential transmission of blood borne pathogens; bleeding; incontinence; embolism; electric shock/burn; transurethral resection (TUR) syndrome; bladder neck contracture; and bruising.

No claim is made that the HYDROS® Robotic System or the AquaBeam® Robotic System will cure any medical condition, or entirely eliminate the diseased entity. Repeated treatment or alternative therapies may sometimes be required.

Caution: Federal law restricts this device to sale by or on the order of a physician.

Aquablation therapy is performed by urologists. For more information about potential side effects and risks associated with Aquablation therapy, speak with your urologist or surgeon and determine if Aquablation therapy is right for you.

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