Reply to Letter

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To the Editor,

We thank the authors for their comment on our article [1]. It was indeed impressive that the varicocele showed such marked improvement in such a short space of time. We would like to impress upon the authors that our paper described a proposed theory to explain the clinical findings. Other authors have proposed different methods for reducing benign prostatic hyperplasia by embolising venous pathways in the pelvis, and indeed, the mechanism of action is complex [2]. In this case, resolution was firstly described by the patient as resolution of symptoms in < 24 h; this was subsequently confirmed on ultrasound imaging.

The reasons why patients get such marked improvements in lower urinary tract symptoms following prostatic artery embolisation (PAE) are likely multifactorial. There is initially relief of some symptoms prior to gland shrinkage which is likely due to neural ischaemia and reduction in arterial and venous blood flow. There is then a period of gland shrinkage and eventual reduction in urethral obstruction and improved urinary flow. The complex arterial and venous anatomy in the pelvis is highly variable and the occurrence of anastomoses frequent. The presence of venous incompetence is also likely and sporadic, and venous congestion may present with a variety of symptoms

dependent on individual anatomy. In this case, the symptom was pain and swelling in the testis that reduced following PAE. Another proposed theory is that there were congenital small communications between the right and left prostatic venous plexus that may have led to preferential decompression of the venous pressure to the symptomatic side.

Compliance with Ethical Standards

Conflict of interest The authors declare that they have no conflict of interest.

Ethical Approval All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki Declaration and its later amendments or comparable ethical standards.

References

1. Tapping CR, Little MW, Boardman P. Immediate resolution of a grade 3 varicocele post prostatic artery embolisation (PAE)". *Cardiovasc Intervent Radiol*. 2017;40(9):1481–3.
2. Strunk H, et al. Treatment of benign prostatic hyperplasia by occlusion of the impaired urogenital venous system—first experience. *Rofo*. 2015;187(3):180–6.

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