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Prazosin therapy

You have been commenced on “minipress” or “pressin” for lower urinary tract symptoms. Minipress (prazosin) comes from a drug class known as alpha blockers. By blocking the alpha receptors found in the smooth muscle around your prostate and bladder neck, these drugs improve the flow of urine and may also reduce the number of times you need to pass urine during the day and night.

Unfortunately, these drugs also have side effects. The smooth muscle which surrounds your prostate also surrounds the blood vessels (veins) in your legs, and is necessary to maintain your blood pressure when you stand etc. So minipress can lower your blood pressure, causing dizziness particularly if you rise suddenly. Indeed these medications are used at higher doses in some patients for the purpose of treating hypertension (high blood pressure).

To prevent these side effects, minipress is commenced at a low dose initially and increased gradually (dose titration). I recommend the following:

Take ½ tablet of **1 mg minipress** each night for 1 week

See your GP for a BP check. If this is satisfactory, you can increase to ½ tablet morning & night.

See your GP for another BP check. If this is satisfactory, increase to ½ tablet morning and 1 tablet at night. After 1 week, increase to 1 mg morning & night.

See your GP for another BP check. If this is satisfactory, increase to 2 tablets morning and 2 tablets at night. This is the recommended (therapeutic) dose.

If you develop symptoms of dizziness or tiredness after a dose increase, go back to your previous dosage or stop the medication altogether. There are other more selective alpha blockers available (eg tamsulosin or “flomaxtra”), however these are more expensive. Sometimes it is necessary to adjust your other blood pressure medications to accommodate prazosin, however you should only do these after discussing with your local doctor.