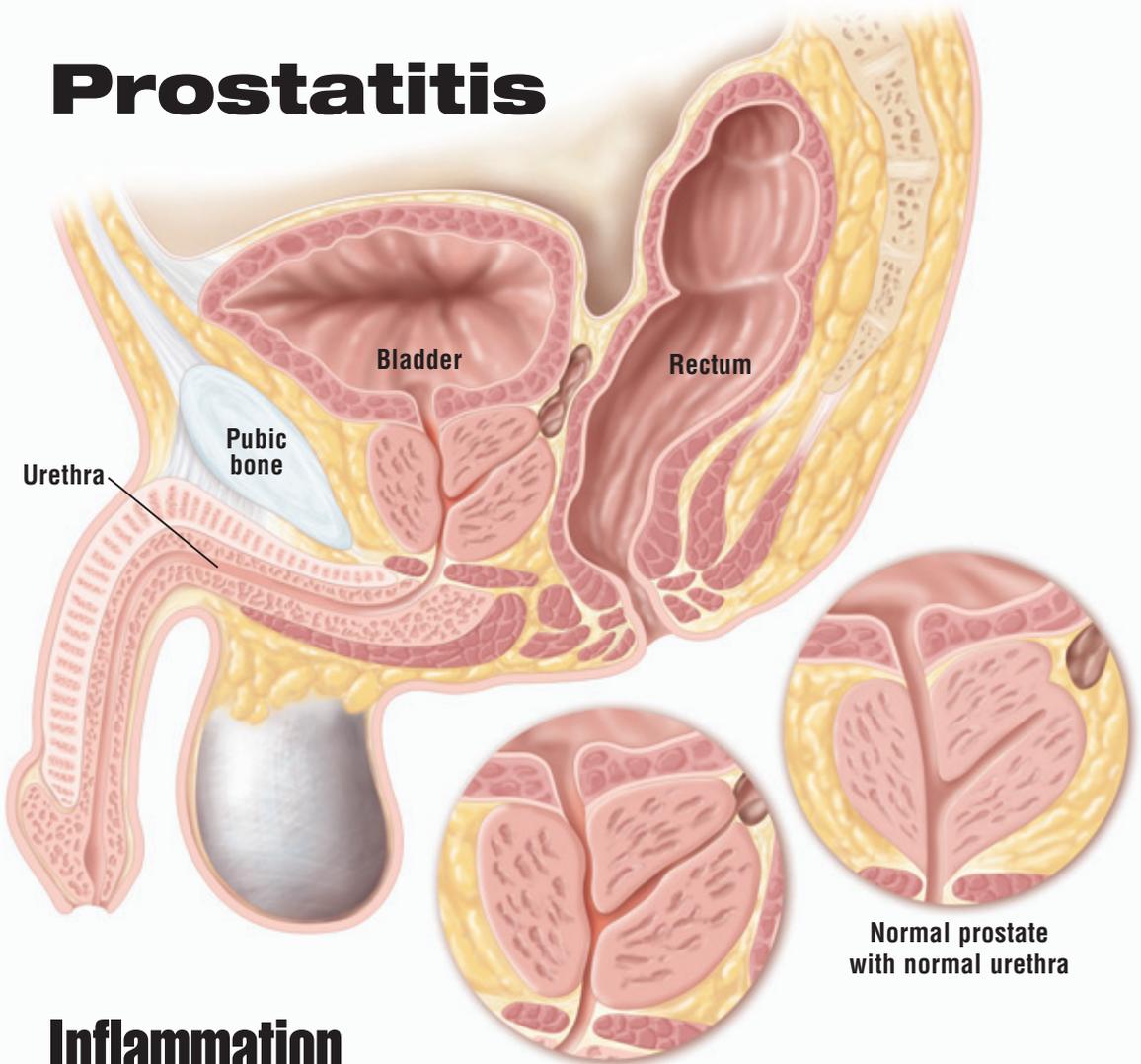


Prostatitis



Inflammation of the Prostate

Inflamed prostate with narrowed urethra

The prostate is a male reproductive gland located just below the urinary bladder and in front of the rectum. The prostate surrounds the urethra, the tube that carries urine from the bladder out through the penis. The function of the prostate is to produce prostatic fluid, which mixes with sperm to make semen, the ejaculatory fluid released during sexual climax.

The prostate can become inflamed for a variety of reasons. Doctors have classified prostatitis into four categories: acute bacterial prostatitis, chronic bacterial prostatitis, chronic prostatitis with or without inflammation (known as chronic pelvic pain syndrome), and inflammatory prostatitis without symptoms. Each of these types of prostatitis has a unique set of symptoms and treatment.

The diagnosis of prostatitis is made after taking a history of symptoms such as fever, body aches, lower back pain, pain in the area of the prostate gland or groin, painful ejaculation, and urinary difficulties. Laboratory analysis of urine samples, sometimes taken both before and after prostate gland massage, can help determine whether inflammation or infection is present. Patients may be referred to a urologist to confirm diagnosis and treatment.

Bacterial prostatitis is treated with antibiotics; prostatitis without a bacterial cause is usually treated with other therapies such as pain relievers, alpha-blockers, or lifestyle changes. Inflammatory prostatitis without symptoms does not require treatment.

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Bacterial Infection Is Not Always the Cause of This Common Condition

About 1 in 10 men will suffer the symptoms of prostatitis, and the risk is higher for younger rather than older men. Men are more likely to develop this condition after a recent urinary tract infection or urinary catheterization, incomplete bladder emptying, horseback riding, or biking.



Symptoms of prostatitis include pain in the pelvic region and difficulties with urination and ejaculation.

The Challenges of Diagnosis

It is important to correctly diagnose prostatitis because effective treatment depends on knowing the type of prostatitis present. The symptoms of prostatitis are similar to those of a bladder infection, bladder cancer, or prostate cancer. Prostatitis is sometimes difficult to diagnose, and treatment does not always lead to a cure. Symptoms of chronic prostatitis, regardless of the cause, can appear and disappear over time. This condition can be challenging for doctors and patients alike.

The diagnosis of prostatitis is made using several tests. Because the prostate gland is located just in front of the rectum, it can be examined by a digital rectal examination. During this procedure, the doctor uses a gloved finger inserted into the rectum to feel whether the prostate gland is enlarged or painful. Urinalysis can show whether bacteria and/or inflammatory cells are present in the urine. Sometimes the urine is tested before and after the prostate is massaged, since the first urine sample may not show bacteria or inflammatory cells, but the second urine sample will show whether these cells are present in the prostate.

If no abnormal cells are found during testing and all other causes are ruled out, the diagnosis of chronic nonbacterial prostatitis, also known as *chronic pelvic pain syndrome*, can be made. The symptoms of chronic pelvic pain syndrome often disappear and reappear, and tests may or may not show inflammatory cells in the urine or prostatic fluid. This form of prostatitis is the most difficult to treat and the most common of the four forms. The patient suffering from chronic pelvic pain syndrome must learn which treatments provide relief and use those to control symptoms.

Treatment Options

General treatment for prostatitis includes measures such as drinking plenty of fluids and urinating regularly; avoiding caffeine, alcohol, and very spicy foods; and taking warm baths to soothe the muscle spasms that can accompany this condition. Some doctors recommend physical therapy exercises to stretch and relax the pelvic muscles and relieve spasm.

Antibiotics are prescribed for those cases of prostatitis caused by bacterial infection. *Acute bacterial prostatitis*, a serious infection that requires immediate attention, often involves fever, chills, muscle aches, groin pain, and difficulty urinating. Intravenous antibiotics may be needed for several days in the hospital, followed by an oral antibiotic for 10 days to 2 weeks. *Chronic bacterial prostatitis* produces symptoms that are less intense but similar to acute bacterial prostatitis, although without fever. The chronic form of prostatitis is more difficult to treat, often requiring several months of full-dose antibiotics or even long-term, low-dose antibiotic therapy to prevent symptoms from returning. A course of low-dose, long-term antibiotics is sometimes helpful for men with chronic pelvic pain syndrome, although it is not clear why. Other medications used to relieve the symptoms of prostatitis include pain relievers, muscle relaxants for pelvic muscle spasms, and alpha-blocking agents to relax the bladder and ease the flow of urine.

If you have questions about a medication prescribed for the treatment of prostatitis, ask your pharmacist.