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Prostatitis - nonbacterial - chronic

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Chronic nonbacterial prostatitis is long-term pain and urinary symptoms that involve the prostate gland or other parts of a man's lower urinary tract or genital area. This condition is not caused by bacterial infection.

See also: [Chronic bacterial prostatitis](#)

Causes

Possible risk factors for nonbacterial prostatitis include:

- Bacteria
- Fungi
- Irritation caused by a backup of urine flowing into the prostate
- Parasites (trichomonads)
- Viruses
- Chemicals
- Nerve disorder involving the lower urinary tract
- Problems with toilet training
- Sexual abuse

Life stresses and some psychological factors may also contribute.

Most patients with chronic prostatitis have the nonbacterial form.

Symptoms

- Blood in the semen
- Blood in the urine
- Pain that is located:
 - Above the pubic bone (suprapubic)
 - Between the genitals and anus (perineal)
 - Low back
 - Scrotum
 - Tip of penis
 - Urethra
- Problems with urinating
 - Decreased urinary stream
 - Frequent urination
 - Pain or burning with urination
 - Incomplete emptying of your bladder
 - Weak urine stream
- Pain with bowel movements
- Pain with ejaculation

Exams and Tests

A physical examination usually will not show anything unusual. However, the prostate may be swollen, soft or firm, warm, and tender.

Urine tests may show white or red blood cells in the urine. A semen culture may show increased white blood cells and low sperm count with poor movement (motility).

Urine culture or culture from the prostate does not show bacteria.

Treatment

Treatment for nonbacterial prostatitis is difficult. The goal is to control symptoms, because a cure is difficult to achieve.

MEDICATIONS:

Many patients are treated with long-term antibiotics to make sure that bacteria are not causing their prostatitis. However, patients who have had symptoms for a long period of time and do not seem to benefit from antibiotics should stop taking them.

See: [Chronic bacterial prostatitis](#)

Medications called alpha-adrenergic blockers help relax the muscles of the prostate gland. They include:

- Doxazosin (Cardura)
- Tamsulosin (Flomax)
- Terazosin (Hytrin)

It usually takes about 6 weeks before these medicines start working.

Aspirin, ibuprofen, and other nonsteroidal anti-inflammatory drugs (NSAIDs) may relieve symptoms in some patients.

Some people have had limited success with pollen extract (Cernitin) and allopurinol. Stool softeners may be recommended to reduce discomfort with bowel movements.

SURGERY:

Transurethral resection of the prostate may be done in rare cases if medical therapy is not successful. This surgery is usually not performed on younger men, because it may cause retrograde ejaculation, which can lead to sterility, impotence, and incontinence.

OTHER THERAPY:

Warm baths may help relieve some of the perineal and lower back pain. A number of other therapies have been used, such as prostatic massage, acupuncture, and relaxation exercises. However, none of these therapies have been proven beneficial.

Outlook (Prognosis)

Many patients respond to treatment. However, others do not get relief even after many attempts at treatment. Symptoms often come back after treatment, and may eventually not be treatable.

Possible Complications

Untreated symptoms of nonbacterial prostatitis may lead to sexual and urinary problems, which can affect your lifestyle and emotional well-being.

When to Contact a Medical Professional

Call your health care provider if you have symptoms of prostatitis.

Alternative Names

NBP; Prostatodynia; Pelvic pain syndrome; CPPS; Chronic nonbacterial prostatitis; Chronic genitourinary pain

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