

## Prostatitis

Prostatitis is an inflammation of the prostate gland that may be caused by a bacterial, viral, or sexually-transmitted infection. Untreated prostatitis may progress to inflammation of the epididymis (epididymitis) or bladder (cystitis). Assessment findings include flu-like symptoms, perianal pain, dysuria, and sexual dysfunction. Oral or IV antibiotics may be administered to stop the infection. Pain may be managed with anti-inflammatory drugs, warm Sitz baths, stool softeners, and alpha-adrenergic blockers. Additional considerations include prostatic massage and increased fluid intake.



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### Cause/Mechanism

#### Bacterial Infection

##### Infectious Bacteria-guy

Prostatitis related to bacterial infection is caused by bacteria ascending from the urethra or descending from the bladder. The bacteria may also reach the prostate gland by circulating in the bloodstream or lymphatic system. Common bacterial organisms include *E. coli*, *Klebsiella*, *Pseudomonas*, *Enterobacter*, *Chlamydia*, *Neisseria gonorrhoeae*, and group D streptococci. Chronic bacterial prostatitis is characterized by recurrent episodes of infection.

#### Chronic Pelvic Pain Syndrome

##### Crone with Pelvic Pain-bolts

Chronic pelvic pain syndrome is characterized as prostate and urinary pain related to nonbacterial causes. This type of prostatitis is caused by a viral illness or sexually transmitted infection, such as chlamydia or gonorrhea. Although a culture is unable to identify causative organisms, leukocytes may be found in prostatic secretions.

### Assessment

#### Flu-Like Symptoms

##### Thermometer and Ice-bag

Prostatitis presents with flu-like symptoms such as fevers and chills. The clinical manifestations of prostatitis are similar to the symptoms of a urinary tract infection (UTI). Chronic prostatitis may increase the patient's risk of developing recurrent UTIs. If the patient develops a fever, a WBC count and blood cultures are indicated to identify the causative organism for appropriate antibiotic therapy.

#### Perineal Pain

##### Pear-kneel causing Perineal Pain-bolts

Perineal and back pain may occur in the patient with prostatitis. Back ache and pelvic pain may occur in both acute and chronic prostatitis.

#### Dysuria

##### Urine-in-flames

Prostatic swelling caused by prostatitis may cause dysuria. The prostate may be extremely swollen, tender, and firm. Additional urinary complications include urinary frequency, urinary urgency, urinary retention, and cloudy urine.

## Sexual Dysfunction

### Limp-wiener

Patients with prostatitis may experience erectile dysfunction, post-ejaculation pain, and problems with libido. Since sexual dysfunction may occur, emotional support and sexual counseling may benefit the patient diagnosed with prostatitis.

## Diagnosis

### Prostatic Massage

#### Plum Massage

Prostatic massage can be useful in the diagnosis of chronic bacterial prostatitis since it squeezes out prostatic secretions which can then be microscopically examined for cells. Prior to and immediately after prostatic massage, the patient is asked to void into a specimen container. The procedure is done using the index finger of a gloved hand to press down on the prostate to release secretions. Prostatic massage is contraindicated in patients with acute bacterial prostatitis due to extreme pain and increased risk of spreading the bacteria.

## Interventions

### Antibiotics

#### ABX-guy

Antibiotics are prescribed to treat acute and chronic bacterial prostatitis. Examples are trimethoprim/sulfamethoxazole (Bactrim), ciprofloxacin (Cipro), ofloxacin (Floxin), and carbachol (Miostat). Additional antibiotics include carbenicillin (Geocillin), cephalexin (Keflex), doxycycline (Vibramycin), and tetracycline. Patients with multiple sex partners are especially considered for prostatitis antibiotic therapy. Acute bacterial prostatitis is treated with oral antibiotics up to four weeks while chronic or complicated prostatitis is treated with hospitalization and IV antibiotics.

### Increased Fluid Intake

#### Up-arrow Fluid Intake

Encourage the patient with prostatitis to increase their fluid intake to diminish symptoms of infection by flushing out bacteria from their system. Patients with acute bacterial prostatitis are especially at risk for dehydration.

### Pain Management

#### Pain-pill-hero

Discomfort and pain related to prostatitis may be managed with anti-inflammatory medications, warm sitz baths, and stool softeners. Alpha-adrenergic blockers are prescribed to relax muscle tissue in the prostate to decreased discomfort. Since effective treatment varies, pain management is individualized to provide optimal relief.