

# Patient information

# **Bacterial Prostatitis**

**Urology Department** 

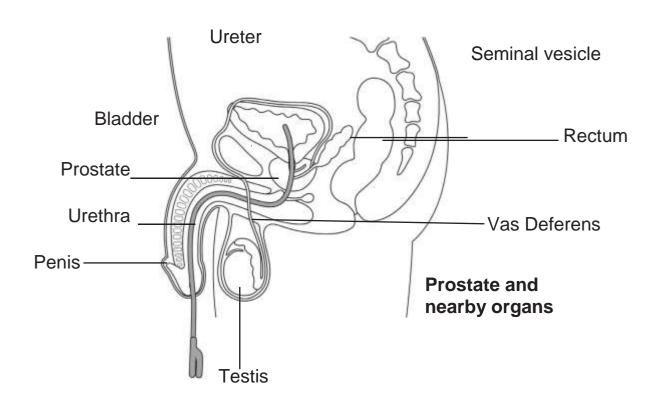
Bacterial prostatitis is an infection of the prostate. It can be acute or chronic. Symptoms include pain, mainly at the base of the penis and around the anus. Treatment includes a course of antibiotics for four to six weeks.

# What is bacterial prostatitis?

Bacterial prostatitis means you have an infection of your prostate gland. There are two types of bacterial prostatitis - acute (sudden onset) and chronic (persistent).

### What is the prostate gland?

Only men have a prostate gland. It lies just beneath the bladder. It is normally about the size of a chestnut. The urethra (the tube that passes urine from the bladder) runs through the middle of the prostate. The prostate helps to make semen, but most semen is made by another gland nearby (the seminal vesicle).



#### What is the difference between acute and chronic bacterial prostatitis?

#### **Acute bacterial prostatitis**

This is when symptoms develop quickly. It usually occurs at the same time as a urine infection. Therefore, you may also have a bladder infection (cystitis). Bacteria (germs) are often found in your urine if a urine sample is taken.

## Symptoms include:

- Pain from your prostate, which may be severe. You feel this mainly at the base of your penis, around your anus (back passage), and lower back. Pain may spread to your penis and testes (testicles). Passing stools (faeces) can be painful.
- Symptoms of a urine infection. For example: pain when you pass urine, passing urine frequently and an urgent desire to pass urine.
- Fever (high temperature). General aches and pains. You generally feel ill.
- A slight discharge (thick fluid) may come out of your penis from your urethra.
- Your prostate feels tender if a doctor examines it with a gloved finger in your rectum.

### **Chronic bacterial prostatitis**

This is when the infection and symptoms develop more slowly. The infection is normally just in your prostate, and you do not have any other infection such as a bladder infection. Symptoms are not as dramatic as with an acute infection. The symptoms may 'drag on', or come and go.

# Symptoms may include:

- Pain similar to acute infection (described above) but usually not as severe. Ejaculation may be painful. The pain may vary in severity from day to day.
- Mild urinary irritation. You may have: mild pain when you pass urine, an urgent desire to pass urine at times, some hesitancy when trying to pass urine or a poor urinary stream.
- You may have general tiredness, and 'aches and pains'.
- Your prostate may feel tender, but not always, if a doctor examines it with a gloved finger in your rectum.

### What causes bacterial prostatitis?

#### Common causes:

• Bacteria that live in your bowel are the common cause. Some bacteria from your bowel may travel up your urethra and cause infection anywhere in the urinary tract - that is, the kidneys, bladder, prostate, or urethra. Cystitis (bladder infection) is the most common urinary tract infection. However, a prostate infection may occur with or without other parts of the urinary tract being infected. Some conditions that cause pooling or blockage of urine increase the risk of a urinary tract infection e.g. enlarged prostate, kidney stones, etc.). This is because bacteria often thrive and multiply quickly in pooled urine.

#### Less common causes:

- Damage to the prostate makes it more prone to infection, e.g. after prostate surgery.
- A catheter passed into the bladder may sometimes let bacteria travel to the prostate.
- Sometimes the prostate is infected by bacteria from blood that has travelled from other infections in the body.
- Sexually transmitted infection is a rare cause of prostatitis.

## Do I need any tests?

- A urine test will often detect bacteria in acute prostatitis.
- In chronic bacterial prostatitis, urine does not usually contain bacteria. To confirm
  chronic bacterial prostatitis, a sample of fluid (secretions) from the prostate may
  be collected. To do this, a doctor can gently massage your prostate with a gloved
  finger in your rectum. By doing this, fluid from the prostate is pushed out into the
  urethra and comes out from the penis to be collected and tested for bacteria. If
  bacteria are found, it confirms that symptoms are due to an infection, and not to
  non-infective prostatitis.
- Tests such as X-rays or scans may be advised following acute prostatitis. This
  is to rule out any problem with your urinary tract that may have contributed to
  causing a urine infection.

## What is the treatment for bacterial prostatitis?

- Antibiotics. A six week course is needed. The first antibiotic may be changed after the result of the urine test is back. The urine test finds which bacterium is causing the infection, and the best antibiotic to treat it.
- Paracetamol or ibuprofen ease pain and fever (high temperature). They are best taken regularly rather than 'now and then'. Stronger painkillers are sometimes needed.

- Laxatives can keep your stools (faeces) soft, if needed. They may help ease pain
  if you have hard stools in your rectum (back passage) pressing on your infected
  prostate.
- Alpha Blockers are medicines that are used to treat prostate enlargement. They
  relax muscle tissue of the prostate and outlet of the bladder. They may help if the
  pain is making passing urine difficult.

## What is the outlook (Prognosis)?

- Acute infection usually clears with antibiotics. However, it is important to take the
  full course to completely clear the infection. There is a risk that an acute infection
  may become a chronic (persistent) infection if you do not take the full course of
  antibiotics.
- Chronic infection may clear with antibiotics. However, infection recurs in some cases, and symptoms may recur or become persistent despite treatment.

#### **Feedback**

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

#### **Further information**

For general queries telephone the Urology Centre

Tel: 0151 282 6797 or 0151 282 6877

Text phone number: 18001 0151 282 6797 / 18001 0151 282 6877

British Prostatitis Support Association www.bpsassoc.org.uk

Prostate Research Campaign - 10 Northfields Prospect, Putney Bridge

Rd, London, SW18 1PE Tel: 020 8877 5840

Web: www.prostate-research.org.uk

For clinical questions specific to your case, telephone the secretary of your Urology Consultant

Author: Urology Department Review Date: January 2024

All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

يمكن توفير جميع المعلومات المتعلقة بالمرضى الموافق عليهم من قبل انتمان المستشفى عند الطلب بصيغ أخرى، بما في ذلك لغات أخرى وبطرق تسهل قراءتها وبالحروف الطباعية الكبيرة وبالصوت وبطريقة برايل للمكفوفين وبطريقة مون والكترونيا.

所有經信托基金批准的患者資訊均可以其它格式提供,包括其它語言、 易讀閱讀軟件、大字

體、音頻、盲文、穆恩體(Moon)盲文和電子格式,敬請索取。

در صورت تمایل میتوانید کلیه اطلاعات تصویب شده توسط اتحادیه در رابطه با بیماران را به اشکال مختلف در دسترس داشته باشید، از جمله به زبانهای دیگر، به زبان ساده، چاپ درشت، صوت، خط مخصوص کوران، مون و بصورت روی خطی موجود است.

زانیاریی پیوهندیدار به و نهخوشانه ی له لایمن تراسته و پهسمند کراون، نهگهر داوا بکریت له فور ماته کانی تردا بریتی له زمانه کانی تر، نیزی رید (هاسان خونندنه و)، چاپی گهوره، شریتی دهنگ، هیلی موون و نمایکترونیکی همیه.

所有经信托基金批准的患者信息均可以其它格式提供,包括其它语言、易读阅读软件、大字体、音频、盲文、穆恩体(Moon)盲文和电子格式,敬请索取。

Dhammaan warbixinta bukaanleyda ee Ururka ee la oggol yahay waxaa marka la codsado lagu heli karaa nuskhado kale, sida luqado kale, akhris fudud, far waaweyn, dhegeysi, farta braille ee dadka indhaha la', Moon iyo nidaam eletaroonig ah.