

Ejaculatory pain affects 75% of men with CPPS

■ Symptom tends to be more common in patients with severe prostatitis, study shows

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San Francisco—Post-ejaculatory pain is understood to be a variable feature of chronic prostatitis/chronic pelvic pain syndrome. But until now, no study had addressed how common it is, what might cause it, or the implications for future study and treatment.



Dr. Shoskes

Examining data from the National Institutes of Health Chronic Prostatitis Cohort Study, Daniel A. Shoskes, MD, and colleagues found that about three-fourths of men with chronic pelvic pain syndrome always have post-ejaculatory pain, and that these men have more severe prostatitis symptoms overall. In addition, the researchers found no indication that ejaculatory obstruction, occult infection, or worse inflammation was responsible.

Dr. Shoskes and his team analyzed the answers to questionnaires given to 486 men with chronic pelvic pain at baseline and at each of three monthly follow-up contacts. The men were divided into subgroups based on whether they never had post-ejaculatory pain (128 patients); did not have it at the beginning of the study, but pain appeared later (106); had pain at the beginning of the study, but not later

(137); or have always had pain (115). The men's symptoms, quality of life, and sexual practices were examined, as were blood cell counts for bacterial growth.

Patients' symptom scores (NIH Chronic Prostatitis Symptom Index total score, excluding post-ejaculatory pain) increased progressively through the four groups: 18.5 for the men who never had post-ejaculatory pain through 25.5 for those who always had pain—a highly significant difference ($p < .0001$).

Mental and physical quality-of-life scores went progressively down through the subgroups from no post-ejaculatory pain to those who always had it. Men who always had post-ejaculatory pain were about 5 years younger than men in the other groups; more likely to live alone; had lower incomes; and had a tendency to have a greater variety of sexual practices. However, none of these were statistically significant. There were no significant differences in white blood cell counts or bacterial growth in urine, prostate fluid, or semen.

"What has struck me is that you can have patients with identical presentations, history, everything the same. But some have severe post-ejaculatory pain and try to avoid ejaculating at all costs, and others, not only do they have no pain, but their symptoms are relieved when they ejaculate," said Dr. Shoskes, chairman of the department of kidney transplantation, Cleveland Clinic Florida, Weston.

Obstruction ruled out

Dr. Shoskes said many have speculated on the reasons why, hypothesizing that those with pain have infections or obstruction. But Dr. Shoskes found no difference in ejaculatory volume between groups and ruled out obstruction as a cause of post-ejaculatory pain.

"The fact that the person has post-ejaculatory pain does not mean they necessarily have an infection."

DANIEL A. SHOSKES, MD

Finding no differences in the presence of either common bacteria or organisms responsible for sexually transmitted diseases such as chlamydia showed that infection wasn't responsible for this symptom either.

"Unfortunately, the study doesn't point to positive choices for treatment. But it does point to negative choices," he said. "In other words, the fact that the person has post-ejaculatory pain does not mean they necessarily have an infection."

That the men who have this symptom all the time also do much worse than others has important implications for clinical research, Dr. Shoskes said.

"Asking about [the presence of post-ejaculatory pain] is an important variable to stratify for when designing new clinical trials," he said. **UT**

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