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*Symptoms improve in half of patients*

# Chronic prostatitis symptoms stabilize over time

**Charles Bankhead**

UT CONTRIBUTING EDITOR

Boston—Perhaps offering a measure of reassurance to prostatitis patients and their urologists, data from a prospective study suggest that the symptoms of chronic prostatitis/chronic pelvic pain syndrome (CP/CPPS) typically improve or remain stable over time.

During a 1-year follow-up of a cohort receiving “usual care” for their symptoms, half the patients had symptom improvement, and more than one-third reported their symptoms unchanged. Symptoms deteriorated in about 14% of patients.

“The primary message in these results is that symptoms of chronic prostatitis and chronic pelvic pain syndrome don’t deteriorate,” said Michael P. O’Leary, MD. “Even among patients with significant symptoms, only 14% got worse. Half the patients actually improved slightly.”

The results helped address questions about changes over time in the severity of symptoms associated with CP/CPPS. The study involved 179 men enrolled in the Chronic Prostatitis Collaborative Network, a prospective observational cohort study. Each patient was followed for at least 1 year to assess changes in symptoms, said Dr. O’Leary, associate professor of urologic surgery at Harvard Medical School and Brigham and Women’s Hospital in Boston.

## Symptoms improve, stabilize

Patient symptoms were assessed by means of the National Institutes of Health Chronic Prostatitis Symptom Index (CPSI). The index has been validated for accuracy in assessing subscales related to pain, urinary symptoms, and quality of life in patients

with the condition. Evaluation of the patients also included a global response assessment scale that rated changes in symptoms across a range that encompassed “markedly improved” at one end of the spectrum and “markedly worsened” at the other.

Patients had CPSI and global evaluations at baseline and then every 3 months during follow-up. Throughout the study, patients received standard or usual care and did not participate in evaluations of new therapies.

“In particular, none of the patients

*“Our results show that symptom improvement is more likely to occur than is worsening of symptoms.”*

MICHAEL P. O’LEARY, MD

received antibiotics,” said Dr. O’Leary. “The enrollment criteria stipulated that a patient had to be off antibiotics for at least 3 months prior to beginning the study.”

After 1 year, the vast majority of patients reported that their symptoms had improved or remained stable. Half said their symptoms were better, and an additional 37% reported no change in their symptoms. The remaining 13% to 14% reported symptom deterioration over the course of the year.

At baseline, the total symptom score on the CPSI averaged 21.9 and ranged between 0 and 43. A year later, the total score had declined to a mean of 18.3, Dr. O’Leary reported. Scores for pain, urinary symptoms, and quality of life

all had improved at 12 months.

## ‘Not likely to get worse’

Most of the improvement occurred during the first 3 months of follow-up. For example, the mean total score on the CPSI declined to 19.6 from baseline to 3 months and then to 18.3 between 3 months and 1 year. Similarly, urinary symptoms decreased from a mean of 4.4 at baseline to 3.8 at 3 months then to 3.6 at 12 months. However, all CPSI subscales, as well as the total score on the index, showed improvement throughout the follow-up period.

An even higher proportion of patients (59%) demonstrated improvement on the global response assessment. An additional 27% said their symptoms remained unchanged, and 14% said their symptoms had deteriorated over 12 months.

Analysis of the data did show an association between higher symptom scores at baseline and both the likelihood of improvement and the magnitude of symptom improvement.

In general, patients with higher baseline symptom scores reported more improvement at 12 months. Caucasian patients were more likely than African-Americans to report improvement.

“Symptoms do fluctuate, and patients do detect changes in symptoms, as indicated by scores on the global response assessment,” said Dr. O’Leary. “Our results show that symptom improvement is more likely to occur than is worsening of symptoms.

“The finding that patients with higher symptom scores at baseline had greater improvement offers some hope that patients with really bad symptoms are at least not likely to get worse and might actually improve slightly.”**UT**