

Efficacy of Transurethral microwave thermotherapy in the treatment of chronic prostatitis/ chronic pelvic pain syndrome

INTRODUCTION AND OBJECTIVE: Chronic prostatitis/ chronic pelvic pain syndrome (CP/ CPPS) is a major health care issue (prevalence rate in the general population is estimated to be 5% to 8,8%) with a negative impact in patients' quality of life. The objective is to determine the efficacy of transurethral microwave thermotherapy (TUMT) in treating patients with **chronic prostatitis/chronic pelvic pain syndrome**. TUMT is a minimally invasive, outpatient treatment, applied as a single session of 1/2 hour duration.

METHODS: Between July 2003 and July 2004, 78 patients with chronic abacterial prostatitis (symptoms, negative cultures), who failed to respond to a variety of conventional treatments, were treated with TUMT (Medispec system) at temperatures of 45 degrees to 60 degrees C for 30 minutes.

A Foley catheter was reinserted after TUMT and removed at 10 days. Patients were evaluated according to history and physical examination, urine culture, PSA level, prostate volume, cystoscopy, IPSS, uroflowmetry, post void residual and NIH- chronic prostatitis symptom index (NIH-CPSI)(pain, voiding symptoms and quality of life). Response was assessed by a symptom severity index and global assessment of symptoms.

RESULTS: The mean patient age was 35 years. The mean prostate volume was 29.3 cm³. Mean follow-up period was 18 months.

NIH-CPSI total score was 24.1 ± 5.3 versus 10.2 ± 9.2 (improvement in mean value of 57.6%), pain score 12.3 ± 4.5 versus 4.1 ± 3.8 (improvement in mean value of 66.6%), quality-of-life impact score 6.9 ± 2.7 versus 3.2 ± 2.9 (improvement in mean value of 53.6%;), and urinary score 4.9 ± 2.3 versus 2.9 ± 3.1 (improvement in mean value of 40.8%). Complete symptom disappearance was obtained in 28% of patients and a partial response in 81%. At 1 year, 70 % of these patients still showed at least a 50 % reduction in prostatitis-related pain. Side effects were minimal and temporary.

CONCLUSION: We found an encouraging success rate with TUMT in relieving urinary symptoms in patients with nonbacterial prostatitis unresponsive to traditional therapeutic schemes. Thermotherapy seems to add a new alternative for this hard to manage disease.

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