

DOES ABACTERIAL PROSTATITIS REALLY EXIST?

Aims and Objectives

In the National Institute of Health Classification, prostatitis syndroms are categorized in clinical practice on the basis of bacteriuria and the number of inflammatory cells in prostatic secretion. According to these indications many patients are considered carriers of abacterial prostatitis and are treated as such. The presence of an agent infecting the prostate cannot however be completely excluded. It could nest in acini or in fibrous-calcifications but still be active and capable of rendering the so-called abacterial prostatitis chronic.

Methods

We recruited 56 of last 350 patients referred to our Centre because of prostatitis. The age-range was 18-46 years (average age 32 years). No patient was affected by bacteriuria. In the prostatic secretion all had at least 10 leucocytes per microscopic field according to Stamey's method (1966). Two-four weeks before prostatic secretion sampling, urethral swabs showed no patient was positive for *Trichomonas vaginalis*, *Chlamydia Tracomatis*, *Mycoplasma Hominis*, *Ureaplasma Urealyticum*, HPV and Herpes Genitalis. Using the transperineal route, ultrasound guided needle aspirates were taken from sonographically dishomogenous areas in the prostate. Samples underwent histological analysis, routine cultures and DNA extraction to detect *Chlamydia Tracomatis*, *Neisseria Gonorrhoeae* and HPV using PCR amplification.

Results

Histological findings were indicative of inflammation in all 56 patients, with lymphocyte aggregates being found rarely within the gland (19%) and mostly in the peri-gland area (46%) and stroma (35%). Cultures were positive for aerobic (56%) and anaerobic (23%) agents

Twenty-one patients (38%) presented with more than 2 species of microorganisms and 9 (15%) with more than 3. DNA infected with *Chlamydia Tracomatis* was found in 19 (34%) patients. The 9 samples (16%) with only anaerobic bacteria were associated with a high number of leucocytes in Stamey's test (>15).

Conclusions

The accuracy of needle sampling under ultrasound guidance using the transperineal route, excludes false positive results caused by contamination with pathogens in urethra. The high frequency of positivity for microorganisms detected, using these techniques, indicates studies on more patients should be performed, in order to revise the classification of prostatic syndromes and to define them more accurately.