

Chronic Prostatitis

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Abstract: This article contains information from local and foreign literature about the factors causing chronic prostatitis, clinical symptoms, types, complications, treatment and prevention. Information on the course, diagnosis and prevention of chronic prostatitis, acute and chronic bacterial prostatitis and chronic pelvic pain syndrome is presented.

Keywords: Chronic prostatitis. Acute and chronic bacterial prostatitis. Chronic pelvic pain syndrome.

Relevance

The prostate is a chestnut-shaped gland that is part of the male reproductive system. The main function of the prostate gland is to produce prostate fluid. Prostate gland fluid is necessary for male reproduction. The prostate gland surrounds the urethra at the neck of the bladder. The prostate gland consists of two or more lobes or lobes surrounded by a fibrous capsule, located in front of the rectum, below the bladder.

Chronic prostatitis is the most common disease among men. According to statistics, the disease occurs in 25-80% of men after the age of 25, and the disease has been increasing in recent times. The main causes of chronic prostatitis are irregular sexual life, sedentary lifestyle, consumption of alcohol and tobacco products, use of drugs without examination and without recommendation. Usually, chronic prostatitis develops slowly without clinical symptoms. Chronic prostatitis occurs on the basis of the dimming of blood circulation and inflammation in the small pelvis. First, the blood vessels of the prostate gland expand, then scar-sclerotic changes occur, as a result of which urine excretion is disturbed, sexual ability decreases, fatigue, nervousness are observed. According to the classification, prostatitis is divided into infectious and non-infectious (caused by swelling of blood vessels of the prostate gland) types. Infectious prostatitis is caused by microbes, viruses, bacteria, fungi. Noninfectious prostatitis occurs without infectious agents. This disease is caused by blood stagnation in the prostate gland, a sedentary lifestyle, and cold.

The prostate gland becomes inflamed as a result of infection entering it by ascending, hematogenous or lymphogenic routes, as well as inflammatory processes from neighboring organs (urethritis, cystitis, epididymitis). Non-specific inflammation of the prostate is caused by the following microbes: staphylococcus, Escherichia coli, streptococcus and Trichomonas from simple animals. Hyperemia caused by stagnation of blood in the area of the venous plexus of the prostate also causes prostatitis.

Pathological anatomy. Catarrhal, follicular, parenchymatous, and purulent prostatitis are distinguished. In the catarrhal form, only the excretory ducts of the glands become inflamed. It is known that these tubes open to the prostate part of the urethra. In the follicular form of the prostate, some parts of the gland are damaged. Inflammatory swelling makes it difficult for pus to drain from the follicular, as a result, small abscesses appear and some parts of the prostate

become enlarged. In parenchymatous prostatitis, all parts of the prostate gland are inflamed with purulence, and the process spreads to the fat cells between the parts and to the paraprostatic cells. The purulent form of acute prostatitis is the next stage of the development of parenchymatous prostatitis, in which the follicles suppurate and form a large abscess. Four types of chronic prostatitis are distinguished: chronic prostatitis or chronic pelvic pain syndrome, acute bacterial prostatitis, chronic bacterial prostatitis, asymptomatic inflammatory prostatitis] The causes of prostatitis vary depending on the type. Chronic prostatitis or chronic pelvic pain syndrome. The exact cause of chronic pelvic pain syndrome is unknown. Researchers suggest that the disease is not caused by a bacterial infection, but by chemicals in the urine, the immune system's reaction to a previous urinary tract infection, or damage to the nerves in the pelvis.

Chronic bacterial prostatitis. Bacterial infection of the prostate gland causes bacterial prostatitis. The acute type appears suddenly and lasts for a short time, while the chronic type develops slowly and lasts for a long time, often years. An infection can occur when bacteria travel from the urethra to the prostate gland. Prostatitis is the most common urinary tract problem in men between the ages of 25 and 50. Chronic prostatitis or chronic pelvic pain syndrome is the most common and least studied form of chronic prostatitis and can occur in men of any age.

Chronic prostatitis; chronic pelvic pain syndrome Men with lower urinary tract nerve damage from surgery or trauma may be more likely to develop chronic prostatitis chronic pelvic pain syndrome. Psychological stress can also make a man more likely to develop this condition.

Symptoms of Chronic Prostatitis: Each type of prostatitis has a range of symptoms that vary depending on the cause and can be different for every man. Many symptoms are similar to other diseases. Chronic prostatitis chronic pelvic pain syndrome. Chronic prostatitis The main symptoms of chronic pelvic pain syndrome may include pain or discomfort that lasts for 3 months or more in one or more of the following areas: scrotum and rectum around. Pain during or after ejaculation is another common symptom. Chronic prostatitis can cause pain that radiates throughout the pelvis in a man with chronic pelvic pain syndrome. Pain in the urethra during or after urination and penile pain during or after urination may occur.

Urinating eight or more times during the day. The bladder begins to contract even with a small amount of urine, which causes you to urinate more often, urge to urinate - incontinence, slow flow and frequent urination.

Chronic bacterial prostatitis. Symptoms of chronic bacterial prostatitis are similar to acute bacterial prostatitis, but less severe. This type of prostatitis often develops slowly and can last for 3 months or more. Symptoms of chronic bacterial prostatitis may include: frequent urination, urge to urinate, burning sensation or pain during urination, pain in the genital area, lower abdomen, nocturia, painful ejaculation, urination retention, problems with starting the flow of urine, causing slow and intermittent urination and retention of the flow of urine. Complications of chronic prostatitis include prostate abscess, erectile dysfunction, and inflammation of the reproductive organs near the prostate gland.

For the diagnosis of chronic prostatitis, patients are initially given clinical anamnestic data and physical examination, and then a rectal examination is performed through the rectum and the prostate gland located next to the rectum is enlarged, tender, or requires additional examination. helps to identify any pathological changes. Urologists use medical tests to diagnose and recommend treatment for lower urinary tract problems associated with prostatitis. Medical tests may include urinalysis, blood tests, urodynamic tests, cystoscopy, transrectal ultrasound, biopsy, and sperm analysis.

Chronic prostatitis. Chronic pelvic pain syndrome. Treatment for chronic pelvic pain syndrome focuses on reducing pain, discomfort, and inflammation. Although antibiotics do not help in the treatment of non-bacterial prostatitis, physical therapy is prescribed, at least until the urologist rules out a bacterial infection. In addition, Kegel exercises involve the tension and relaxation of the muscles that hold urine in the bladder and keep the bladder in the correct position. Also

called pelvic floor exercises. For men with chronic pelvic pain syndrome symptoms caused by psychological stress, appropriate psychiatric treatment and stress reduction can reduce the recurrence of symptoms. To evaluate the effectiveness of treatment, a urologist uses a standard question called the National Institutes of Health (NIH) Chronic Prostatitis Symptom Index. may ask a series of questions from the rovnoma. The questionnaire helps the urologist assess the severity of symptoms and how they affect a man's quality of life.

Chronic bacterial prostatitis. A urologist treats chronic bacterial prostatitis with antibiotics; however, treatment requires a longer course of therapy. A urologist may prescribe low-dose antibiotics for up to 6 months to prevent the infection from recurring. The urologist may also prescribe a different antibiotic or use a combination of antibiotics if the infection keeps coming back. A urologist may use alpha blockers to treat urinary retention caused by chronic bacterial prostatitis to treat chronic prostatitis chronic pelvic pain syndrome. These medications help relax the bladder muscles near the prostate and reduce symptoms such as painful urination. Men may need surgery to treat urinary retention due to chronic bacterial prostatitis. Surgical removal of scar tissue from the urethra often improves urine flow and reduces urinary retention.

Prevention of chronic prostatitis

For the prevention of chronic prostatitis, they should have regular sexual life and follow a healthy lifestyle. Men should consult a doctor when treating chronic prostatitis for themselves.

Conclusions.

Chronic prostatitis is the most common disease among men. According to statistics, the disease occurs in 25-80% of men after the age of 25, and the disease has been increasing in recent times. There are four types of chronic prostatitis: chronic prostatitis or chronic pelvic pain syndrome, acute bacterial prostatitis, chronic bacterial prostatitis, asymptomatic inflammatory prostatitis. treats based on standards.

The size of the prostate does not determine how severe the symptoms will be. Some men with significantly enlarged and chronic prostatitis may experience only minor urinary symptoms. For some men, symptoms stabilize over time and may even improve over time. Untreated urinary problems can eventually lead to urinary obstruction. Decreased libido can cause infertility.

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