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Acute Prostatitis



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Etiology

Older Adult

Older Adult

In older adults over 35 years old, acute prostatitis is commonly caused by Escherichia Coli.

Escherichia coli

E-coal-eye

Escherichia coli is the most common agent causing acute prostatitis in older adults over 35. It can enter the prostate through the urethra via ascending infection, be introduced through the reflux of infectious urine, or travel from the rectum through the lymphatic and blood systems.

Young Adult

Young Adult

Acute prostatitis in young adults is commonly caused by ascending urethral infection following anal or vaginal intercourse. The most common organisms that cause acute prostatitis due to intercourse are Chlamydia trachomatis and Neisseria gonorrhoeae.

Chlamydia trachomatis

Chlamydia-clam

Chlamydia trachomatis is a small gram-negative obligate intracellular microorganism and the most common sexually transmitted infection. The condition can lead to chronic prostatitis if the patient is not treated properly.

Neisseria gonorrhoeae

Knives Gunner-ship

Neisseria gonorrhoeae is a gram-negative diplococcal microorganism. It is the second most common sexually transmitted infection and can cause acute prostatitis in young adults due to sexual intercourse.

Signs and Symptoms

Urinary Frequency and Urgency

Urinating Frequency-wave and Urgently squeezing knees

Patients may experience urinary frequency (frequent urination, occurring approximately every 1-2 hours, especially at night) and urgency (a strong urge to urinate). Inflammation is the underlying cause of these symptoms.

Dysuria

Urine-in-flames

Dysuria is a painful or burning sensation during urination, which can result from inflammation in various parts of the urinary tract, including the prostate, bladder, or urethra.

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Low Back Pain

Low Back Pain-bolts

Patients may experience pain in various areas, including the lower back, suprapubic region, penis, testes, scrotum, or anus.

Warm, Tender, Swollen Prostate

Warm-fire, Tenderizer, Swollen Prostate-Plum

Digital rectal examination in patients can reveal a warm, tender, and swollen prostate.

Treatment

Treat Underlying Cause

Treating Underlying Attacker

Treatment aims to address the underlying cause, along with providing supportive care. Regimens used for STI etiology include a single dose of Ceftriaxone injection followed by Doxycycline, which can effectively cover N. gonorrhea and C. trachomatis. For non-STI cases, treatment options include Ciprofloxacin or Levofloxacin, with an alternative being Trimethoprim/sulfamethoxazole. Supportive care may involve fluids, antipyretics, and analgesics.
