

How can physiotherapy help with the chronic pain management of this condition?

- A specialist and skilled physiotherapist will perform a detailed assessment to ascertain your problems. They will observe your overall movement patterns identifying structures that may contribute to your problem (including nerves, muscles, tissue, joints and organs). For many men the pelvic floor muscles will be a part of this assessment as they commonly contribute to the problem, they can be evaluated by feeling externally and internally via the back passage.
- If appropriate, manual therapy techniques may be used to encourage normal movement and function. Local techniques to release trigger points or connective tissue restrictions may be used. Exercises may be taught to restore a normal movement pattern and prevent a reoccurrence.
- The nervous system, including the brain, also needs to be taught to stop perceiving a threat and to allow improved movement patterns. We can do this by down training the nervous system using breathing techniques, relaxation and stress management. We encourage daily exercise; walking is a very effective way to encourage endorphin release (these are hormones which reduce pain and produce a feeling of wellbeing).

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 Complex Regional Pain Syndrome

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This leaflet was written by the staff of the Pain Relief Foundation and endorsed by The Walton Centre Pain Team, Walton Center for Neurology & Neurosurgery, Lower Lane, Liverpool, L9 7LJ, UK www.thewaltoncentre.nhs.uk



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CHRONIC PELVIC PAIN SYNDROME IN MEN

Chronic Pelvic Pain Syndrome (CPPS), previously known as chronic nonbacterial prostatitis is a condition with long-term pelvic pain without evidence of a bacterial infection.

- CPPS, previously known as chronic nonbacterial prostatitis, affects approximately 2–6% of men and is most common in adulthood, with a mean age around 43 years. It is characterised by pelvic or perineal pain without evidence of bacterial infection, lasting longer than three months, and can significantly impair quality of life. Pain may radiate to the lower back, buttocks, thighs, penis, testicles, or groin, and can be constant or intermittent.

Symptoms

Men with CPPS may experience a combination of:

- **Pain:** the pain can vary in intensity and type. It may be localised to the lower abdomen, hips, buttocks, back passage, perineum, scrotum or penis.
- **Urinary symptoms:** frequent urination, urgency, weak stream, incomplete emptying, or burning during urination
- **Sexual dysfunction:** pain during or after ejaculation, erectile difficulties, or reduced libido
- **Musculoskeletal involvement:** pelvic floor muscle tension, lower back discomfort, or pain while sitting
- **Bowel-related symptoms:** discomfort during bowel movements, constipation, or a sensation of incomplete evacuation
- **Emotional impact:** anxiety, depression, and social withdrawal due to chronic pain

CAUSES OF CHRONIC PELVIC PAIN SYNDROME

THE EXACT CAUSE OF CPPS IS UNKNOWN. HOWEVER, THERE ARE SEVERAL THEORIES OF CAUSATION.

- CONSTIPATION
- ENLARGED SPLEEN
- INFLAMMATION OF THE INTESTINES
- KIDNEY STONES
- PAINFUL BLADDER SYNDROME
- PELVIC FLOOR DYSFUNCTION
- ENDOCRINE HORMONE ABNORMALITIES
- NEUROGENIC INFLAMMATION
- BACTERIAL INFECTION
- INTERSTITIAL CYSTITIS

CHRONIC PELVIC PAIN SYNDROME (CPPS) IN MEN CAN ARISE FROM VARIOUS CAUSES, INCLUDING INFECTIONS, INFLAMMATION, AND MUSCULAR DYSFUNCTION, OFTEN LEADING TO PERSISTENT DISCOMFORT IN THE PELVIC REGION.

- **PROSTATITIS:** THIS IS ONE OF THE MOST COMMON CAUSES OF CPPS. IT CAN BE BACTERIAL OR NON-BACTERIAL. CHRONIC PROSTATITIS, OFTEN REFERRED TO AS CPPS, IS CHARACTERIZED BY PELVIC PAIN WITHOUT EVIDENCE OF A BACTERIAL INFECTION. SYMPTOMS MAY INCLUDE PAIN IN THE PERINEUM, LOWER BACK, AND GENITAL AREA.
- **URINARY TRACT INFECTIONS (UTIS):** UTIS CAN LEAD TO PELVIC PAIN, ESPECIALLY IF THE INFECTION AFFECTS THE BLADDER OR PROSTATE. SYMPTOMS MAY INCLUDE PAIN DURING URINATION AND LOWER ABDOMINAL DISCOMFORT.
- **SEXUALLY TRANSMITTED INFECTIONS (STIS):** INFECTIONS SUCH AS CHLAMYDIA AND GONORRHEA CAN CAUSE PELVIC PAIN, ALTHOUGH THEY ARE LESS COMMON IN MEN COMPARED TO WOMEN. THESE INFECTIONS MAY LEAD TO COMPLICATIONS IF LEFT UNTREATED.

- **MUSCLE DYSFUNCTION:** TENSION OR SPASMS IN THE PELVIC FLOOR MUSCLES CAN CONTRIBUTE TO CHRONIC PAIN. THIS MUSCULAR DYSFUNCTION MAY BE RELATED TO STRESS, INJURY, OR OTHER UNDERLYING CONDITIONS.
- **NERVE IRRITATION:** CONDITIONS THAT IRRITATE THE NERVES IN THE PELVIC REGION CAN LEAD TO CHRONIC PAIN. THIS MAY INCLUDE PREVIOUS INJURIES OR CONDITIONS AFFECTING THE SPINE.
- **INFLAMMATION:** CHRONIC INFLAMMATION IN THE PELVIC AREA, WHICH MAY NOT BE LINKED TO AN INFECTION, CAN ALSO BE A CONTRIBUTING FACTOR. THIS INFLAMMATION CAN ARISE FROM VARIOUS SOURCES, INCLUDING AUTOIMMUNE RESPONSES.
- **OTHER CONDITIONS:** OTHER POTENTIAL CAUSES INCLUDE KIDNEY STONES, HERNIAS, AND GASTROINTESTINAL ISSUES, WHICH CAN MIMIC OR CONTRIBUTE TO PELVIC PAIN SYMPTOMS.

TREATMENT

- TREATMENT FOR CHRONIC PELVIC PAIN SYNDROME IN MEN INVOLVES A MULTIMODAL APPROACH INCLUDING MEDICATIONS, PHYSIOTHERAPY, LIFESTYLE CHANGES, AND PSYCHOLOGICAL SUPPORT.

GENERAL TIPS TO HELP:

- EXERCISE -WALKING 30 MINUTES A DAY STRETCHING REGIME FOR THE PELVIS
- STRESS MANAGEMENT - EVALUATE YOUR WORK/LIFE BALANCE EXPLORE MINDFULNESS MEDITATION YOGA OR TAI CHI
- DRUG MANAGEMENT- DISCUSS PAIN MANAGEMENT OPTIONS WITH YOUR CONSULTANT OR GP
- HEALTHY LIVING RESOURCE LIST COUNSELLING WEIGHT MANAGEMENT CONSTIPATION MANAGEMENT FLUID/FIBRE BALANCE