

Common treatment for men's pelvic pain proves ineffective

18 December 2008



Urology professor Curtis Nickel heads an international study of chronic pelvic pain in men. Photo by Stephen Wild

A commonly-prescribed drug for men suffering from a painful pelvic condition failed to significantly reduce patients' symptoms in an international study led by Queen's University professor and urologist at Kingston General Hospital, Curtis Nickel.

The drug, called Alfuzosin, is regularly prescribed by more than half of family doctors to treat chronic prostatitis/chronic pelvic pain syndrome. This affliction is estimated to affect from six to 12 per cent of the population.

Sponsored by the U.S. National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), part of the National Institutes of Health, the study is published today in the prestigious *New England Journal of Medicine*.

"The results of our study will inform not only future clinical trials of alpha-blockers, but also other potential therapies," says Dr. Nickel, who is Canada Research Chair in Urologic Pain and Inflammation.

"Although the evidence for using alpha-blockers to treat new cases of chronic prostatitis/chronic pelvic pain syndrome is weak, some physicians have advocated use of this class of drug in men with this condition," he adds. "Our findings do not support this recommendation and should prompt reconsideration of use of an alpha-blocker as the first drug of choice for these patients."

Prostatitis is a common and costly medical condition, with chronic prostatitis/chronic pelvic pain syndrome the most frequent type seen by physicians. Men with this condition experience pain in the genital and urinary tract area and also report lower urinary tract symptoms and sexual problems that negatively affect their quality of life.

In the Queen's-led study, 233 men diagnosed with chronic prostatitis/chronic pelvic pain syndrome were randomly assigned to either alfuzosin or an identical-looking placebo. None of the men had received prior treatment with a beta-blocker.

Over the 12-week trial, participants were asked to rate improvements in pain perception, problems with urination, and their quality of life. The rates of response in both groups were the same.

"In medical research, it is as important to find out which treatments are effective, as well as those which are not beneficial," notes NIDDK Director Griffin Rodgers. "Now researchers can focus their efforts on more promising therapies."

Source: Queen's University

APA citation: Common treatment for men's pelvic pain proves ineffective (2008, December 18) retrieved 1 May 2021 from <https://medicalxpress.com/news/2008-12-common-treatment-men-pelvic-pain.html>

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