Prostatitis is a diagnosis used to describe inflammation of the prostate gland. It is thought that prostatitis results from bacterial infection; however, infection is not always found. In fact, most cases of recurrent prostatitis do not demonstrate active infection. Prostatitis can affect men of any age. Half of all men will experience an episode of prostatitis at some point in their lives. Prostatitis is the most common urological disorder in men over the age of 50 and the third most common disorder in men under 50. Prostatitis alone makes up nearly a quarter of all office visits involving the urinary system by young and middle-aged men. The prostate is located at the base of the bladder where it grows around the urethra, the tube that drains urine from the bladder. The prostate mainly functions to produce ejaculatory fluid, though it is also thought to protect the testicles and bladder from infection.

Prostatitis can be broken down into four separate classes.

Nonbacterial Prostatitis (NBP)
The most common form of prostatitis, it is thought to be simple inflammation of the prostate gland. Inflammatory cells are found in the urine, but bacteria is not isolated in many cases. The causes for NBP are unknown, but it is thought to be either backwards flow of uninfected urine into the prostate (chemical prostatitis) or an as yet unidentified infection. The symptoms are urgency, frequency, pelvic discomfort/low back pain and pain at the tip of the penis; blood in the semen may also be seen. Antibiotics are helpful, as well as anti-inflammatory medications. A modification in diet may help relieve symptoms faster in some patients. NBP may also be a chronic condition, characterized by the nagging and smoldering symptomatology.

Chronic Bacterial Prostatitis (CBP)
This less common subtype of prostatitis involves recurrent symptoms with bacteria found in the urine. It is not necessarily the after effects of ABP; the symptoms are urgency, frequency, low
Prostatitis: Fact or Fiction

- Erectile dysfunction during prostatitis is common.
  
  FACT: The nerves that control erections run alongside the prostate and may be temporarily aggravated by prostatitis inflammation. This usually resolves in the weeks after treatment.

- Only truck drivers get prostatitis.
  
  FICTION: Trucker's disease is a nonspecific term for the irritation of many nerves and organs. These pains can be very specific or vague, depending on the nerves affected.

- Pain and blood with ejaculation are common with prostatitis.
  
  FACT: The inflammation in prostatitis most often causes both symptoms. Blood in the semen rarely indicates cancer. The pain usually subsides over the course of treatment. The blood may persist for several months following treatment, sometimes giving a rusty discoloration to the semen.

- Untreated prostate infections may lead to reduced fertility.
  
  FACT: This is generally a problem in 3rd world countries where access to healthcare and medication is limited. Infections that get out of control and go untreated can lead to blockages in the fertility anatomy. Also, the body's immune system may learn to attack the body's own sperm or impair the sperm's ability to fertilize an egg.

- Prostatitis leads to cancer.
  
  FICTION: No studies link prostatitis to prostate cancer. It is true, however, that PSA readings may be falsely elevated during an episode of prostatitis. If the PSA is being used to screen for prostate cancer, make sure that an episode of prostatitis is cleared up for several weeks before trusting the PSA result.

- Prostatitis doesn't respond to treatment needs additional evaluation.
  
  FICTION: Persistence of symptoms warrants x-ray studies and a look in the bladder (cystoscopy) to rule out other causes of the symptoms.