

Case series of low intensity shock wave therapy for men with chronic prostatitis/chronic pelvic pain syndrome

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Objectives: Chronic Prostatitis/Chronic Pelvic Pain Syndrome (CPPS) is a heterogeneous syndrome. Low Intensity Shock Wave (LiSW) has emerged as a potential therapy and several sham controlled studies have shown efficacy. We wished to study the efficacy and safety of LiSW in CPPS patients with clinical phenotyping to better understand who may best respond.

Methods: Men were enrolled provided they had a diagnosis of CPPS for at least 6 months. Concurrent stable medications were not stopped. LiSW was delivered with the UroGold 100 machine (Tissue Regeneration Technologies, Woodstock, GA) at 0.14 mJ/mm². There were 4 treatment sites, 2 on each side of the perineum at 500 shocks each for a total of 2000 shocks. Symptom severity was measured with the National Institute of Health Chronic Prostatitis Symptom Index (CPSI) at baseline and 1 month following the 4 weekly treatments. Patients also self reported a General Response Assessment (GRA) ranging from 1 (significantly improved) to 5 (significantly worse). Patients were clinically phenotyped by the validated UPOINT system (www.upointmd.com). Pre and post CPSI values were compared with the paired t test with significance set at p<0.05.

Results: 14 men enrolled with a mean age of 45.1 years (range 22-67) and median duration of 36 months (range 9-240). Men had a mean of 2.6 positive UPOINT domains (range 1-5) and all but 2 had pelvic floor tenderness (domain T). Total CPSI improved from 27.7 +/- 5.4 to 19.4 +/- 7.5 (p=0.003). While the pain and quality of life scores improved significantly, there was no change in the urinary subscore. 9 patients (64.3%) had a >6 point drop in CPSI. By GRA, 7 patients said they were significantly improved, 2 were somewhat improved and 5 were unchanged. There were no significant differences in responders to non-responders for phenotype or symptom duration although responders had a higher starting pain score (14.0 vs 9.4, p=0.005) and both patients without pelvic floor spasm failed to improve.

Discussion: LiSW with the UroGold 100 using a once a week protocol improved symptoms of CP/CPPS in the majority of patients without side effects. Of note, all responders had pelvic floor spasm, and shock wave therapy is well established in the treatment of pain from neuromuscular trigger points.

Disclosure:

Work supported by industry: no. The presenter or any of the authors act as a consultant, employee (part time or full time) or shareholder of an industry.