

## 14. Genitourinary Tract Disorders (including Climacteric Disorders)

### Reference

Lee SH, Lee BC. Electroacupuncture relieves pain in men with chronic prostatitis/chronic pelvic pain syndrome: Three-arm randomized trial. *Urology* 2009; 73: 1036–41.

### 1. Objectives

To evaluate the efficacy of electroacupuncture for chronic pelvic pain.

### 2. Design

Randomized controlled trial (RCT).

### 3. Setting

One Oriental hospital (Kyunghee University Medical Center), Republic of Korea.

### 4. Participants

Thirty-six patients with chronic prostatitis/chronic pelvic pain syndrome (CP/CPPS) (category III) meeting National Institutes of Health (NIH) consensus criteria, poorly responsive to general treatment such as antibiotics and antiinflammatory drugs, NIH-Chronic Prostatitis Symptom Index (NIH-CPSI) total score >15, and 3 months of persistent pain within the last 6 months.

### 5. Intervention

Arm 1: Advised exercise + Electroacupuncture (n=12).

Arm 2: Advised exercise + Sham electroacupuncture (n=12).

Arm 3: Advised exercise only (n=12). Electroacupuncture was performed at the left and right Zhongliao (BL33, 中髎), Ciliao (BL 32, 次髎), and Huantiao (GB30, 環跳) acupuncture points, and sham electroacupuncture was performed at non-acupuncture points 15 mm from the real acupuncture points. The sham acupuncture points were not electrostimulated, but the subjects could hear the sound of electrostimulation.

Among 36 subjects, 4 subjects withdrew because of their inability to comply with the study requirements (1 in Arm 1, 2 in Arm 2, 1 in Arm 3).

### 6. Main Outcome Measures

NIH-CPSI total score, NIH-CPSI subscores for pain severity, urinary symptom, and quality of life (QOL), and levels of prostaglandin E2 and  $\beta$ -endorphin in prostatic fluid after 3 and 6 weeks of treatment.

### 7. Main Results

After 3 weeks of treatment, there was a significant decrease in NIH-CPSI pain severity subscore in Arm 1 and Arm 2 but no significant among-group difference in NIH-CPSI total score. After 6 weeks of treatment, the decreases in NIH-CPSI total score and NIH-CPSI pain severity subscore were significantly greater in Arm 1 than in Arm 2 and Arm 3. There were no significant among-group differences in NIH-CPSI urinary symptom and QOL subscores. Although the mean prostaglandin E2 level in postmassage urine samples decreased in all arms of the study, it decreased significantly in Arm 1 ( $P=0.023$ ).

### 8. Conclusions

The electroacupuncture has therapeutic efficacy for chronic prostatitis and pelvic pain. The effect is related to prostaglandin E2 level.

### 9. Safety assessment in the article

Not mentioned.

### 10. Abstractor's comments

This study verified the efficacy of electroacupuncture for chronic prostatitis and pelvic pain. It is suggested that a similar study on electroacupuncture for chronic pelvic pain in women will be worthwhile.

### 11. Abstractor and date

Cho JH, 16 July 2010.