14. Genitourinary Tract Disorders (including Climacteric Disorders)

Reference

1. Objectives
To evaluate the efficacy of electroacupuncure 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 β-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