

TREATMENT OF TRICHOMONAL PROSTATITIS WITH METRONIDAZOLE*

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The treatment of trichomonal infestations of the genito-urinary tracts of both men and women has been greatly improved since the introduction of metronidazole in 1959. Cure rates in women of over 80 per cent, have been reported by several observers (Rodin, King, Nicol, and Barrow, 1960; Nicol, Barrow, and Redmond, 1960; Watt and Jennison, 1962). Even higher cure rates have been claimed in cases of trichomonal urethritis in men (Durel, Roiron, Siboulet, and Borel, 1960; Rodin and others, 1960; Sylvestre, Belanger, and Gallai, 1960).

The incidence of trichomonal prostatitis is unknown. As examination of the prostatic secretion is not always carried out in the male sexual contacts of women with trichomonal vaginitis or in men with symptoms of disease of the lower genito-urinary tract, the true frequency of the condition is likely to remain undetermined.

Patients and Method

The patients in this series were all men who attended the department of venereology or were seen in private practice either because their sexual partners had been found to have trichomonal vaginitis or because they had undiagnosed symptoms referable to the lower genito-urinary tract. Their ages ranged from 17 to 74 years.

In addition to physical examination, investigation included an urethral scrape and culture, microscopical and cultural examination of the centrifuged deposit of urine, prostatic massage, and microscopical and cultural examination of the prostatic secretions, frequently on more than one occasion.

Results

Trichomonas vaginalis was demonstrated in the prostatic secretions in 34 patients. Symptoms were entirely absent in 27 patients, but six complained of vague discomfort or pain in the perineum, the penis, or both. One patient complained of frequency of micturition. A past history of urethritis was obtained

from nineteen of the patients and in six of them no investigations had been performed or treatment given and the discharge had cleared up spontaneously. Trichomonal vaginitis was found in the sexual partners of ten of the men.

The diagnosis was made by demonstrating *Trichomonas vaginalis* on microscopical examination and growing it in cultures in eighteen of the patients. The parasite was found microscopically but was not grown in cultures in nine and was grown in cultures but not demonstrated microscopically in seven patients.

Treatment consisted of oral metronidazole, 200 mg. three times daily after meals for 7 days. Most of the patients were followed for 3 months and repeated tests were performed on the prostatic secretions and the urine to establish and confirm cure. Thirty of the patients (88 per cent.) were considered to have been cured by a single course of treatment and were discharged from follow-up after 3 months. In two patients (both of whom denied intercourse or the possibility of re-infection), the parasite reappeared in the prostatic secretions during the period of observation but in both cases it disappeared after a second course of metronidazole at the same dosage. In two further patients the parasite was not eliminated from the prostatic secretions despite two courses of metronidazole, however, a third course of treatment was administered together with prostatic massage on alternate days for 2 weeks, and in both cases the parasite disappeared from the prostatic secretions and did not reappear during the 3-month period of follow-up.

The tests on the prostatic secretions after successful metronidazole therapy revealed chronic prostatitis to be present in seven patients. A diagnosis of chronic prostatitis was made when there were more than ten pus cells in several 2-mm. microscopical fields or when clumps of pus were found in the prostatic secretions.

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Summary

- (1) The symptoms and methods of diagnosis in 34 patients with trichomonal prostatitis are described.
- (2) The results of treatment with oral metronidazole were satisfactory and produced a cure rate of 88 per cent.
- (3) Residual chronic prostatitis was found in seven patients after treatment with metronidazole.

REFERENCES

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Traitement de la prostatite à trichomonas par le métronidazole**RÉSUMÉ**

- (1) On décrit les symptômes et les méthodes diagnostiques de la prostatite à trichomonas chez 34 malades.
- (2) Les résultats du traitement par le métronidazole oral furent satisfaisants et produisirent un taux de guérison de 88%.
- (3) On trouva une prostatite chronique résiduelle chez 7 malades après le traitement par le métronidazole.