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Does osteopathic treatment have an influence on the symptoms of patients with chronic prostatitis/chronic pelvic pain syndrome (CPPS)? A randomized controlled trial

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Background: Prostatitis is the most frequent urological complaint diagnosed in men under 50. As bacteria are found in less than 5% of all cases, one is dealing chiefly with chronic abacterial prostatitis. The symptoms seem to be multifactorial so that conventional therapies rarely lead to an improvement.

Objective: This study was designed as a randomized controlled trial to test, whether osteopathic interventions may be effective in alleviating the symptoms of chronic abacterial prostatitis (CAP)/chronic pelvic pain syndrome (CPPS).

Material and Methods: The study was carried out in an osteopathic practice. The patients recruited were referred by urologists and through newspaper articles. Thirty-four patients (age 29–70) with defined CAP were recruited and randomized in two groups. The treatment group (20 patients) received 5 osteopathic treatments over a period of 8 weeks, at 1-week intervals for 3 weeks and with an interval of up to 3 weeks at the end. The control group (14) had to do a mixture of gymnastic and physiotherapeutic exercises as a 'sham treatment'. Main outcome parameters were the improvement of lower urinary tract symptoms, reduction of chronic pelvic pain and improvement of quality of life. The instruments used to measure the changes were the questionnaires IPSS (International Prostatic Symptom Score), NIH-CPSI (National Index of Health-Chronic Prostatitis Syndrom Index) and QoL (Quality of Life).

Results: A comparison of the osteopathic group and control group showed statistically significant differences to the advantage of the osteopathic group ($P < 0.000$) in all the parameters. Over the whole period the IPSS of the osteopathic group improved from 19.7 to 10.3 points (48%, $P = 0.0000$), the Chronic Prostatitis Symptom Index NIH from 17.9 to 8.8 (51%, $P = 0.000$) and the quality of life (QoL) from 4.4 to 1.8 points (58%). In contrast, the values of the control group stayed to a large extent constant. In the follow-up, 6 weeks after the last treatment, the positive effects of the osteopathic treatment had been sustained. There was no case of a deterioration of the results achieved.

Conclusion: A series of osteopathic interventions seems a promising therapeutic regimen for CAP sufferers. Further studies will have to demonstrate whether these findings are reproducible.