

## Epididymitis

The epididymis is a series of small tubes attached to the back of each testicle that collects and stores sperm. One of the most common causes of scrotal pain is epididymitis, an infection and subsequent inflammation of these coiled tubes.

Epididymo-orchitis occurs when the infection spreads to include the testicle.

Epididymitis is usually a secondary bacterial infection triggered by a range of conditions, such as urinary tract infections or sexually transmissible infections (STIs). The bacteria in the urethra (the tube that allows the exit of urine and sperm from the penis) simply backtrack through the urinary and reproductive structures to the epididymis.

Treatment options include antibiotics and bed rest. Some men develop chronic epididymitis, which is characterised by inflammation even when there is no infection.

### Symptoms

The symptoms of epididymitis include:

- Slight fever
- Chills
- A sensation of heaviness in the affected testicle
- Sensitivity to touch or pressure in the affected testicle
- Enlargement of the testicle
- Abdominal pain
- Pelvic pain
- Frequent urge to urinate
- A burning sensation on urination
- Discharge from the penis
- Blood in the urine
- Painful ejaculation.

### A range of causes

Most cases of epididymitis are caused by bacterial infection. Some of the causes include:

- Urinary tract infections
- Sexually transmissible infections (STIs), such as chlamydia and gonorrhoea
- Recent genito-urinary surgery, including prostatectomy
- The use of urinary catheters
- Some congenital kidney and bladder problems.

### Possible complications

If left untreated, acute epididymitis can lead to a range of complications including:

- **Chronic epididymitis** – persistent inflammation, even when there is no bacterial infection.
- **Abscess** – a ball of pus may accumulate inside the epididymis or nearby structures. Surgery is needed to drain the pus.
- **Destruction of the epididymis** – the inflammation can permanently damage or even destroy the epididymis and testicle. This can lead to infertility.
- **Spread of infection** – the infection may escape the scrotum and spread to any other organ or system of the body.

### Diagnosis

Epididymitis can be hard to distinguish from testicular torsion, particularly in younger men. Testicular torsion means the testicle has twisted and choked off its supply of blood. Sometimes epididymitis and testicular torsion can occur at the same time.

Epididymitis is diagnosed using a number of tests, including:

- Physical examination
- Medical history
- Urine tests
- STI tests
- Blood tests
- Ultrasound, if necessary to distinguish epididymitis from testicular torsion.

### **Treatment**

The treatment options for epididymitis include:

- A course of antibiotics
- Antibiotics for any sexual partners, if an STI was the cause
- Bed rest
- Pain-killing medication
- Cold compresses applied regularly to the scrotum
- Elevation of the scrotum
- Admission to hospital, in cases of severe infection
- Subsequent check-ups to ensure the infection has cleared up.

### **Chronic epididymitis**

Some men develop chronic epididymitis, which is inflammation even when there is no infection. The cause is unknown, although it is thought that hypersensitivity of certain structures, including nerves and muscles, may cause or contribute to the condition. Some of the known risk factors include genito-urinary surgery, exposure to STIs and prior attacks of acute epididymitis. However, a man without these risk factors can still develop the condition.

### **Diagnosis of chronic epididymitis**

Tests are needed to distinguish chronic epididymitis from a range of other disorders that can cause constant scrotal pain such as testicular cancer, enlarged scrotal veins (varicocele) or a cyst within the epididymis. Tests may include a physical examination and ultrasound scan.

### **Treatment of chronic epididymitis**

Chronic epididymitis is difficult to treat. Since there is no infection, antibiotics don't work. Some of the treatment options may include:

- Frequent warm baths
- Non-steroidal anti-inflammatory drugs (NSAIDs)
- Medications to relax associated muscles
- Medications to alter nerve messages to the scrotum
- Anaesthetic or steroid injections into the scrotum
- Surgery to remove the affected epididymis
- Stress management techniques.

### **Where to get help**

- Your doctor
- Urologist
- Family Planning Victoria Tel. 1800 013 952 or (03) 9257 0100 [www.fpv.org.au](http://www.fpv.org.au)

### **Things to remember**

- Epididymitis is infection and subsequent inflammation of the epididymis, a series of small tubes attached to the back of each testicle that collects and stores sperm.
- Most cases of epididymitis are caused by bacterial infection arising from urinary tract infections or sexually transmissible infections (STIs) like gonorrhoea or chlamydia.

- Treatment options include antibiotics and bed rest.
- Some men develop chronic epididymitis, which is inflammation even when there is no infection.

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Family Planning Victoria

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