Epididymitis

Summary

- Epididymitis is an infection that causes inflammation of the epididymis, which is 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 from a urinary tract infection or a sexually transmissible infection (STI) such as gonorrhoea or chlamydia.
- Treatment options include antibiotics and bed rest.
- Some men develop chronic epididymitis, which is inflammation even when there is no infection.

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 pain in the scrotum is epididymitis, which is an infection that causes inflammation of these coiled tubes. Epididymo-orchitis is the spread of the infection to the testicle.

Epididymitis is usually a secondary bacterial infection that can be triggered by a range of conditions, such as a urinary tract infection or a sexually transmissible infection (STI). The bacteria in the urethra (the tube carrying urine and sperm from the penis) move through the urinary and reproductive structures to the epididymis.

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

Symptoms of epididymitis

The symptoms of epididymitis include:

- slight fever
- chills
- feeling of heaviness in the affected testicle
- sensitivity to touch or pressure in the affected testicle
- enlarged testicle
- pain in the abdomen or pelvis
- frequent urge to urinate
- burning feeling when urinating
- discharge from the penis
- blood in the urine
- pain when ejaculating.

Causes of epididymitis

Most cases of epididymitis are caused by bacterial infection. Causes include:

- urinary tract infections
- STIs, such as chlamydia or gonorrhoea
- recent genito-urinary surgery, including prostatectomy (the surgical removal of all or part of the prostate gland)
- the use of urinary catheters
- some congenital kidney and bladder problems.

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

- chronic epididymitis – the inflammation can become persistent, even when there is no bacterial infection
- abscess – a ball of pus can accumulate inside the epididymis or nearby structures, requiring surgery to drain the pus
- destruction of the epididymis – the inflammation can permanently damage or even destroy the epididymis and testicle, which can lead to infertility
- spread of infection – the infection can spread from the scrotum to any other structure or system of the body.

**Diagnosis of epididymitis**

It can be hard to tell the difference between epididymitis and testicular torsion, especially in younger men. Testicular torsion is when the testicle has twisted and cut off its supply of blood. Sometimes, epididymitis and testicular torsion occur at the same time.

Epididymitis can be diagnosed using a number of tests, including:

- physical examination
- medical history
- urine tests
- STI tests
- blood tests
- ultrasound.

**Treatment for epididymitis**

The treatment options for epididymitis include:

- antibiotics
- antibiotics for any sexual partners (if an STI was the cause)
- bed rest
- pain-relieving medication
- cold compresses applied regularly to the scrotum
- elevation of the scrotum
- a stay in hospital (in cases of severe infection)
- check-ups afterwards to make sure the infection has cleared up.

**Chronic epididymitis**

Some men develop chronic epididymitis, which is inflammation even when there is no infection. The cause is not known, but 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 past 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 in the epididymis. Tests can include a physical examination and ultrasound.

**Treatment for chronic epididymitis**

Chronic epididymitis is difficult to treat. Antibiotics should not be used, as there is no infection.

Treatment options include:

- frequent warm baths
- non-steroidal anti-inflammatory medication
• medication to relax associated muscles
• medication 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. (03) 9257 0100 or freecall 1800 013 952

Things to remember

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**Family Planning Victoria**

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