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Transurethral resection of the prostate for chronic bacterial prostatitis.

[Barnes RW](#), [Hadley HL](#), [O'Donoghue EP](#).

Forty-nine patients with chronic bacterial prostatitis causing symptoms and receiving routine accepted treatment for many months or years, without permanent relief, were treated by transurethral prostatic resection (TURP). The purpose of the surgery was to remove the gland down to the true capsule (radical TURP). The patients' own appraisal of the results, the absence of symptoms and of infection, indicate 67% had a good result when assessed 1 year following surgery; 21% were improved and 12% received no benefit. Transurethral resection is recommended in selected cases and when the surgeon is able to remove all of the glandular tissue without causing large perforations through the true capsule. Acceptable results have been achieved in two-thirds of cases. There was no mortality and insignificant morbidity. Patients experiencing no benefit and those who were only improved but not cured were either poorly selected or infected prostatic tissue was not removed.

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