

TOP TIPS IN UROLOGY

SECOND EDITION



EDITED BY

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1. Chronic prostate infection (category II chronic bacterial prostatitis) can be ruled out by performing a pre and post massage test
2. There is no clinical rationale to perform microscopic evaluation of prostate-specific specimens in clinical practice
3. The NIH Chronic Prostatitis Symptom Index (NIH-CPSI) saves time and frustration in clinical practice
4. Learn the phenotypic approach to CPPS classification employing UPOINT
5. Develop individual treatment plans for each patient by focusing therapies on specific UPOINT domains

- 6. Consider a combination of the 5 as for initial therapy for category III CPPS: Avoidance, Antibiotics, Alpha-blockers, Anti-inflammatories, 5-Alpha reductase inhibitors
- 7. Multimodal therapy works better than monotherapy
- 8. Don't disregard the phytotherapies
- 9. Get your non-urological colleagues involved
- 10. Set realistic expectations

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