

Epididymitis is swelling of the coiled tube connected to the testicle. The tube is called the epididymis. Males of any age can get epididymitis but mostly men ages 19 to 35. It causes pain, swelling, and inflammation of the epididymis and can last longer than 6 weeks.

Epididymitis

What causes it?

- ▶ A bacterial infection from the urethra, the prostate, or the bladder.
- ▶ Gonorrhea and chlamydia infections.
- ▶ *E. coli* and similar bacteria (mostly in elderly men and children).
- ▶ Some medicines such as amiodarone.
- ▶ Trauma to the groin.

In older men, acute epididymitis may be due to a recent prostate biopsy or urinary tract procedure or surgery. It can also be due to sexual contact and from a weak immune system.

What increases your risk?

- ▶ History of prostate or urinary tract infections.
- ▶ Enlarged prostate.
- ▶ Being uncircumcised.
- ▶ Recent surgery.
- ▶ Past structural problems with your urinary tract.
- ▶ Regular use of a urethral catheter.
- ▶ Sexual intercourse with more than one partner while not using condoms.



What are signs?

- ▶ Epididymitis may start with a low fever, chills and a heavy feeling in the testicle area:
 - The area will get more sensitive to pressure and become painful as it progresses.
 - This infection can easily spread to the testicles.

Other Signs:

- ▶ Blood in the semen.
- ▶ Discharge from the penis.
- ▶ Pain or discomfort in the lower abdomen or pelvis.
- ▶ Enlarged lymph nodes in the groin.
- ▶ Fever (less common).
- ▶ Lump on testicle.
- ▶ Pain during sex.
- ▶ Pain or burning during ejaculation and urination.
- ▶ Swelling of the scrotum.
- ▶ Tender, swollen, and painful groin area.
- ▶ Testicle pain.

How do you know if you have it?

The only way to know if you have epididymitis is by getting a medical exam. Your health care provider (HCP) may:

- ▶ examine you for signs of infection.
- ▶ do an ultrasound or nuclear scan of the testicles.
- ▶ run lab tests for bacteria.

If caused by sexually transmitted bacteria, partners of men with epididymitis will need treatment.

How is it treated?

- ▶ Antibiotics.
- ▶ Pain or anti-inflammatory medications.
- ▶ Lying down with your scrotum elevated.
- ▶ Applying ice packs to the painful area.
- ▶ Wearing an athletic supporter.
- ▶ Avoiding lifting heavy objects.
- ▶ Avoiding sex until your infection has cleared.

Follow-up with your health care provider to make sure it is gone, especially if the signs fail to improve within 72 hours of starting treatment.

If it gets worse

Most often, Epididymitis improves with antibiotic treatment and does not cause other health problems. However, it may return and cause:

- ▶ An abscess in the scrotum.
- ▶ Infected testicles.
- ▶ Chronic epididymitis.
- ▶ Opening on the skin of the scrotum.
- ▶ Death of the testicular tissue due to lack of blood flow.
- ▶ Infertility (rare).

If you have it:

- ▶ Always finish antibiotic treatment, even if the signs of it go away. Know that it may take several weeks for the tenderness to disappear.
- ▶ Talk to sex partners about getting treatment if you got it from sexual contact.
- ▶ Sudden and severe pain in the scrotum is a medical emergency. You need to be seen by your provider right away.



How can you avoid it?

- ▶ Avoid sexual contact.
- ▶ Have safer sex.
 - Reduce the number of sexual partners.
 - Condoms, when used correctly, can reduce the risk of getting and spreading STDs, bacteria, and viruses. However, condoms may not cover all infected areas. Each time you have sex use a condom (male or female type):
 - During vaginal sex.
 - During anal sex.
 - During oral sex.
 - Have sex with only one partner who does not have sex with others.



For more information, see *Safer Sex* on page 71

Learn more:

Epididymitis – CDC 2015 Sexually Transmitted Diseases Treatment Guidelines Sheet
<http://www.cdc.gov/std/tg2015/epididymitis.htm>

Epididymitis – Medline Plus – U.S. Library of Medicine
<http://www.nlm.nih.gov/medlineplus/ency/article/001279.htm>