

Non-Surgical Treatment of Prostate Diseases

The Manila Protocol

- Presented at the 1997 American Urological Association Annual Convention, New Orleans, U.S.A., 1998—2000 NIH-IPCN meeting Washington D.C.
- Studied and adapted by medical universities in the U.S.A. and Canada funded by the National Institute of Health.
- The protocol was featured in several journals of urology and published in a major medical textbook.

Final Conclusion: The Manila Protocol has appeared in the medical literature five times, including a case report, case series, retrospective study, and prospective study. It has been corroborated in 3 clinical settings by 6 different physicians. Authors have included the Manila physicians, Dr. Hennenfent, a Canadian urologist - J. Curtis Nickel, and an American urologist Daniel A. Shoskes, the latter two both National Institutes of Health funded physicians, who are part of the Chronic Pelvic Pain Collaborative Network. The Manila protocol has been corroborated at separate medical centers. One caveat, however, is that the original Manila doctors have never commented in the medical literature that the Manila Protocol has been reproduced properly at other centers. Another point is that Manila Protocol is far from mature, because the technique of prostate massage has not been clearly defined, many other diagnostic tests could be added if more research could be done, antibiotic studies are still needed, and many other issues need to be resolved. However, all studies have been consistent in that some patients underwent a complete remission of symptoms, and the majority of patients if not healed, experienced symptomatic improvement. Currently, the Manila Protocol appears to have the highest reported rate in the medical literature of men undergoing complete remission of symptoms or improvement of symptoms. If anyone knows of any other treatment displaying such favorable remission rates, please post them on the message board at www.ProstateTalk.com for our review. ProstateTalk.com sees evidence in the medical literature that chronic prostatitis may be caused by infection, urinary reflux into the prostate, semen reflux into the prostate, immune dysfunction, obstruction of prostatic ducts and acini, pelvic floor dysfunction, neurologic disease, autoimmune disease, hormonal disease, allergic processes, muscular disease, vascular disease, radiation seed implants, urinary catheters, spinal cord injury, and other etiologies. ProstateTalk.com is currently evaluating the world's literature on chronic prostatitis on its message board. End of PROSTATITIS Digest - 22 Apr 2003 to 23 Apr 2003 (#2003-116)

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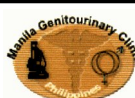
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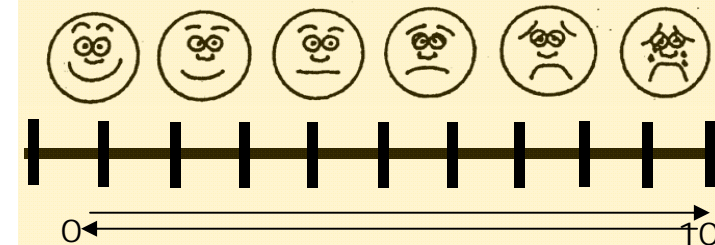
You don't have to live with it!

| SYMPTOMS | | | |
|---------------------------------|-----------------------------------|---|-----------------------------------|
| Pain | Urinary dysfunction | Sexual symptoms | Others |
| Suprapubic | Decrease in force | Decrease in force and volume of ejaculate | Elevated PSA |
| During urination | Sensation of incomplete urination | Bloody ejaculate | Recurring urinary tract infection |
| Testicle and during ejaculation | Frequency | Infertility | Joint pains |
| Perineum | Inability to control urination | Erectile dysfunction | Depression |
| Low back | Urinary obstruction | | Bloody urine |

How bothersome are your symptoms?

Not Bothered

Extremely Bothered



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