



December 2009

30

NEWSBULLETIN

International Society for Sexual Medicine

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Editorial Office

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EDITORIAL

Letter from The Editor

Dear ISSM Members,

We are delighted to present issue 30 of the ISSM news bulletin. In this issue B. Srilatha reports robust scientific activity in the field of Sexual Medicine in Asia. This year's APSSM regional scientific activity coordinated with the 5 Biennial Meeting of Asia Pacific Society for the Study of Aging Male (APSSAM), which was held in Osaka, Japan. She also reports on the 3 Asia-Pacific Forum on Andrology (3APFA) meeting (October 10–13, 2009, China), and invites members to attend the 12th APSSM 2009 meeting in Singapore 12 – 15 December, 2009.

Adriàn Momesso reports on the X Slams Meeting held in Florianopolis, Brazil. Very interesting reports of the main sessions' topics and presentations are contributed by Fernando Facio, Allister Cara and Diana Lebel.

ISSM List was very active (May-August 2009) with many cases and discussions. I thank Sudhakar Krishnamurti for an outstanding effort to summarise it into an easy-to-read digest. Alexandre Gilbert, website administrator, provides us with more technical advice. He suggests some "ISSM List Best Practice tips" to make the maximum benefit of the ISSM List. All previous ISSM discussions and digests, since 2001, may be reached through the education link on the ISSM

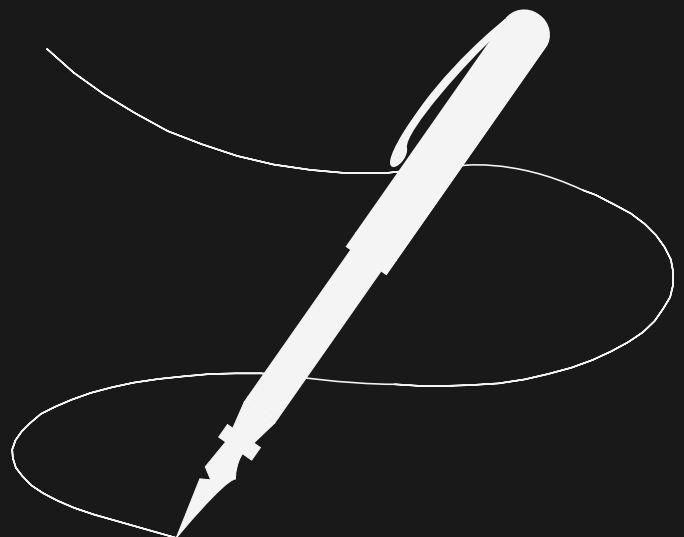
website <http://www.issm.info/v4/data/issmlist/digestdir.asp>. They are sorted by topic to facilitate reaching the subjects of interest.

The 'Reviews & Updates' as well as the 'Opinion / Debate' Sections are dominated by reviews from SLAMS -members. María Victoria Bertolino presents a review about an important topic 'Female Sexual Dysfunction and Androgens'. A practical review about Premature Ejaculation is provided by Almeida G.L. and Busato W.F.S., with a focus on current various treatment options. Biologist Alberto Rubio Casillas and César Manuel Rodríguez Quintero present a controversial topic 'The female prostate: the end of the controversy'!

Luca Incrocci provides us with his popular Meetings Calendar. We would be delighted to receive your suggestions and contributions to enhance the Newsbulletin and website. For further information about ISSM activities please visit the ISSM website www.issm.info

We hope you enjoy reading this issue.

Hussein Ghanem, M.D.
Editor, ISSM Newsbulletin



OPINION/DEBATE/EDITORIAL

The female prostate: the end of the controversy

History

The existence of the female prostate had been a controversial topic in modern sexological medicine, frequently ignored, or thought it was a vestigial organ, however, today this perception has lagged behind, recent investigations recognize it as a functional gland capable of performing the same functions as the male prostate gland (Zaviacic et al, 2001).

In 1672, the Dutch anatomist Regnier de Graaf presented the first description of the female prostate and he was also the first to use this term. He described it as “a collection of functional glands and ducts surrounding the female urethra.

He was also the first to attempt to explain the role of the female prostate on writing “the function of the prostate is to generate a pituito-serous juice that make women more libidinous” and “the discharge by the female prostate causes as much pleasure as that obtained by the male prostate gland” (De Graaf, 1672). The Scottish gynecologist Alexander J.C. Skene played a rather controversial role in the investigation of the female prostate. His work, published 200 years after of De Graaf’s work, described the female prostate as two para-urethral ducts that opened at the sides of the urethral opening, and exerted an inhibitory effect on further progress in the investigation of the female prostate.

Effect of estrogens on the female prostate morphogenesis

During early embryological development, the basic pattern is feminine, that is to say, we are all women. This changes when the male embryo begins to produce its own hormones, around the eighth week of gestation. Only then the physical development of male and female bodies differs, though less than many assume. In order to form the male prostate, the woman must have a primary structure (urogenital sinus) from which, at the appropriate time, continue the development towards a structure such as the prostate. This results in woman also has a prostate gland. Although the prostate tissue is androgen-dependent, physiology and pathology are also influenced by estrogens (Garcia-Flores et al., 2005). Although androgens are essential for initiating branching in the prostate and seminal vesicles, the suppression of androgens production after branching morphogenesis reduces the rate and extent of this process, but does not prevent the subsequent ramification (Donjacour and Cunha, 1988). These findings allow us to understand why the prostate does not disappear during embryological development, as previously thought.

Official recognition

The recognition of the existence of the female prostate is due largely to the substantial work that for over 25 years has made Dr. Milan Zaviacic, a prominent forensic pathologist, at the Comenius Medical School, University of Bratislava, in the Slovak Republic. Based on research findings of Zaviacic and his collaborators, the Federative International Committee on Anatomical Terminology (FICAT) in its 2001 meeting

in Orlando, Florida, USA, agreed to include the term female prostate in the next edition of Histological Terminology, prohibiting the use of terms gland or para-urethral ducts, and Skene’s gland to appoint the prostate in women (Zaviacic et al, 2001). Thus, the latest edition of Histological Terminology: International Terms for Cytology and Histology, already includes the term female prostate (see table 1)

Table 1		
H3.06.03.0.00009	Glandula paraurethralis; Prostata femininã	Paraurethral gland; Female prostate
H3.06.03.0.00010	Tunica muscularis	Muscular layer; Muscular coat
H3.06.03.0.00011	M. Sphincter urethrae externus	External urethral sphincter; Rhabdosphincter
H3.06.03.0.00012	(Ductus paraurethralis)	(Paraurethral duct)
H3.06.04.0.00001	Urethra masculina {vide paginam 78}	Male urethra {see page 78}
⁹² H3.06.03.0.00009 <i>Prostata feminina</i> : This term is introduced because of the morphological and immunological significance of the structure (Zaviacic M, Ablin R.J. The female prostate and prostate-specific antigen. Immunohistochemical localization, implications of this prostate marker in woman and reasons for using the term <i>prostate</i> in the human female. <i>Histol Histopathol</i> 2000; 15: 131-142).		

Table 1. Copy of the original document published by the FICAT on October 18, 2008, in which the term female prostate it was accepted. Courtesy of Dr. Colin Wendell-Smith, Secretary of the FICAT. www.ifaa.net/FICAT.htm

At international level this book provides the most current terminology for histology professionals, students, medical writers and editors, medical researchers, medical libraries and related companies in the medical sciences.

Location and structure

While the male prostate gland surrounds the urethra, the female prostate is distributed over the wall of the urethra (Huffman, 1948; Zaviacic et al., 1983, 2000; Wernert et al., 1992; Wimpissinger et al, 2007)(Figure 1). This is the main macroscopic difference between male and female prostate glands. The thickness of the wall and the length of the female urethra thus limit the size of the prostate, which for these reasons is smaller than the prostate in the male. However, despite the less space available for female prostate, it possesses all the structural components characteristic of the male prostate (Zaviacic, 1987, 1999). We also know that despite its smaller size, female prostate has at least two main functions: exocrine (production of prostate specific antigen, and prostate specific acid phosphatase) and neuroendocrine (serotonin production) (Zaviacic, 1999).

Sexological implication

With regard to the sexological role, Zaviacic (2001) states: “The organ is mainly significant in terms of sexual pleasure for women: the prostate tissue is a new erogenous zone for women. It participates in the phenomenon of female ejaculation, in which the female prostate is stimulated indirectly”.

Health Relevance

The recognition that women have a functional prostate could stimulate new investigations by gynecologists, urologists and uro-gynecologists, as there are many aspects that have not been studied. For example, in pathology, there are reported cases of female prostate cancer (Ebisuno et al, 1995; Zaviacic et al., 2002; Oliveira Reis et al, 2009), which although very rare, indicate that the female prostate may also develop cancer and prostatic hyperplasia (Zaviacic et al, 2001). Wimpissinger et al (2009) presented the first Magnetic Resonance Imaging (MRI) study of prostatic disease in 7 women, thus extending our knowledge on this female gland. Zaviacic et al (2001) argue that “the female prostate diseases have been incorrectly diagnosed as diseases of the female urethra and treated as such”, therefore, this article tries to motivate gynecologists, urologists and uro-gynecologists to reevaluate the diagnostic criteria around the diseases like the female urethral syndrome, because the evidence suggests it may actually be cases of prostatitis (Gittes and Nakamura, 1996; Gittes, 2002).

Finally, we insist that it must be use the term female prostate, accepted by the FICAT, since even to date, the organ is named incorrectly by many doctors, gynecologists and uro-gynecologists under the name of Skene's glands or para-urethral glands.

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Figure 1. Location of the female prostate. This corresponds to the meatal type (near the urethral meatus) described by Dr. Milan Zaviacic, and is present in approximately 70% of women. With authorization of Mr. Brad Fox.

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2009

12th Meeting of the Asia Pacific Society for Sexual Medicine (APSSM)

December 12-15, Singapore

Prof. P. G. Adaikan

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5, Lower Kent Ridge Road

119074, Singapore

Phone: +065 67 72 26 70

Fax: +065 67 79 47 53

E-mail: obgtcb@nus.edu.sg

Web: www.apssm2009.com



10th Congress of the European Federation of Sexology (EFS)

May 9-13, Porto, Portugal

AIM Group

Via Flaminia 1068

00168 Rome, Italy

Phone: +39 06 33 05 31

Fax: +39 06 23 32 56 23

E-mail: efs2010@aimgroup.it

Web: www.efs2010.com

105th Annual Meeting of the American Urological Association (AUA)

May 29-June 3, San Francisco, CA, USA

AUA Convention Department

1120 North Charles Street

Baltimore, Maryland 21201-5559, USA

Phone: +1 401 22 34 308

Fax: +1 401 22 34 372

E-mail: convention@auanet.org

Web: www.auanet.org

2010

10th Meeting of the International Society for the Study of Women's Sexual Health (ISSWSH)

February 18-21, St. Petersburg, FL, USA

ISSWSH

1100 East Woodfield Road, Suite 520

Schaumburg, IL 60173, USA

Phone: +1 847 51 77 225

Fax: +1 847 51 77 229

E-mail: isswsh@wjweiser.com

Web: www.isswsh.org

2nd Rotterdam Symposium on Cancer and Sexuality

June 4th, Rotterdam, The Netherlands

International Society for Sexuality and Cancer (ISSC)

E-mail: secretariat@issc.nu

Web: www.issc.nu

4th Multidisciplinary Sexual Dysfunction Conference

April 15-18, Melbourne, Australia

Jenny Crosbie Deakin University

221 Burwood Hwy, Burwood Vic 3125, Australia

Phone: +61 3 92 51 78 87

E-mail: jcrosbie@deakin.edu.au

Web: www.deakin.edu.au/sexual-dysfunction-conference

5th Japan-Asean Conference on Mens' Health & Aging

July 9-11, Kota Kinabalu, Borneo, Malaysia

Malaysian Society of Andrology and The Study of the Aging Male (MSASAM)

1, SS12/1A, Subang Jaya

47500 Petaling Jaya, Selangor, Malaysia

Phone: +60 35 63 91 777

Fax: +60 35 63 91 870

E-mail: perandro@streamyx.com

Web: www.japanaseanmenshealth2010.com

25th Annual Congress of the European Association of Urology (EAU)

April 16-20, Barcelona, Spain

Congress Consultants B.V.

P.O. Box 30016

6803 AA Arnhem, The Netherlands

Phone: +31 26 38 90 680

Fax: +31 26 38 90 686

E-mail: info@congressconsultants.com

Web: www.eaubarcelona2010.org

14th World Meeting of the International Society for Sexual Medicine (ISSM)

September 26-30, Seoul, Korea

ISSM Executive Office

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Web: www.issm2010.info



6th European Congress of Andrology

September 29-October 1, Athens, Greece

Phone: +30 210 64 02 389

Fax: +30 210 64 11 156

E-mail: efiko_efiko@yahoo.gr

Web: www.andro.gr

13th Congress of the European Society for Sexual Medicine (ESSM)

November, dates t.b.c., Bucharest, Romania

CPO Hanser Service

Zum Ehrenhain 34

22882 Barsbüttel, Germany

Phone: +49 40 67 08 820

Fax: +49 40 67 03 283

E-mail: essm@cpo-hanser.de

Web: www.essm.org



Fall Meeting of the Sexual Medicine Society of North America (SMSNA)

November 10-13, Miami Beach, FL, USA

SMSNA

1100 Woodfield Road, Suite 520

Schaumburg, IL 60173, USA

Phone: +1 847 51 77 225

Fax: +1 847 51 77 229

E-mail: info@smsna.org

Web: www.smsna.org

