

prostate exam by female

prostate exam by female is a subject that often raises questions and curiosity among men considering prostate health screenings. This comprehensive article explores the process of prostate exams performed by female healthcare professionals, addresses common concerns, and explains the importance of early detection for prostate conditions. Readers will learn about the procedure, benefits, what to expect during the exam, and how comfort and professionalism are maintained regardless of the examiner's gender. In addition, the article discusses factors influencing patient comfort, answers frequently asked questions, and provides expert insights on overcoming anxiety related to the experience. By the end, readers will be empowered with knowledge, dispelling myths and gaining confidence in their healthcare choices related to prostate exams by female practitioners.

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Understanding Prostate Exams

Prostate exams are a routine part of men's health screenings, typically recommended for individuals over 50 or those at higher risk of prostate conditions. The exam is designed to detect signs of prostate enlargement, inflammation, or prostate cancer at an early stage. A prostate exam by female healthcare provider is performed using the same medical protocols and standards as those conducted by male practitioners. The examiner's gender does not affect the accuracy or efficacy of the test. The most common method is the digital rectal exam (DRE), which involves a gloved, lubricated finger gently inserted into the rectum to assess the prostate gland's size, texture, and any abnormalities.

Types of Prostate Exams

There are several approaches to prostate evaluation. The digital rectal exam is the

primary physical assessment, while a prostate-specific antigen (PSA) blood test may also be recommended. Both methods are crucial for comprehensive prostate screening and are performed in a professional and confidential setting.

- Digital Rectal Exam (DRE)
- Prostate-Specific Antigen (PSA) Blood Test
- Transrectal Ultrasound (less common)

Why Prostate Exams Are Important

Regular prostate exams are vital for detecting issues such as benign prostatic hyperplasia, prostatitis, and most importantly, prostate cancer. Early diagnosis increases treatment options and improves outcomes significantly. Prostate exams by female healthcare professionals are equally effective, as the technique relies on medical training rather than physical strength. Timely screenings can help prevent complications and provide peace of mind.

Prostate Health Risks

Certain factors increase the risk of prostate problems, including age, family history, race, and lifestyle choices. Men with a family history of prostate cancer or who are over 50 should consult their healthcare provider about the timing and frequency of exams. Female practitioners are qualified and trained to assess these risks and provide guidance.

1. Age (risk increases after 50)
2. Family history of prostate cancer
3. Ethnic background (higher risk for African-American men)
4. Diet and lifestyle factors

What Happens During a Prostate Exam by Female Healthcare Provider

During a prostate exam by female practitioner, the steps are the same as with any licensed medical professional. The procedure is quick, usually lasting only a few minutes, and is designed to minimize discomfort. The patient is typically asked to undress from the waist down and either lie on their side or bend over the examination table. The female provider

will wear gloves, apply lubricant, and gently insert a finger into the rectum to feel the prostate gland.

Step-by-Step Process

Many patients wonder about the specifics of what occurs during the exam. Here is an overview:

- Patient is positioned comfortably for the exam
- Provider explains the procedure and answers questions
- Gloves and lubricant are applied for hygiene and comfort
- Digital rectal exam is performed to assess prostate gland
- Provider discusses findings and recommends any follow-up tests

Professionalism and Confidentiality

Female healthcare professionals adhere to strict codes of conduct, ensuring patient dignity and privacy throughout the exam. All procedures are performed with respect and sensitivity, focusing on the patient's health and wellbeing. Confidentiality is maintained at all times, and any concerns or discomfort should be communicated openly with the provider.

Addressing Common Concerns and Misconceptions

Some men may feel apprehensive about receiving a prostate exam by female practitioner due to personal, cultural, or psychological reasons. It's important to understand that medical professionals are trained to provide nonjudgmental care, and the focus is on health, not gender. Studies have shown no difference in the accuracy of exams performed by female versus male providers.

Dispelling Myths

There are several misconceptions surrounding prostate exams by female healthcare professionals. These include fears of increased discomfort, embarrassment, or compromised care. In reality, female providers are equally skilled, compassionate, and experienced in performing these exams.

- Gender of provider does not affect exam accuracy
- Patient comfort is a priority for all healthcare professionals
- Professionalism is maintained regardless of gender

Patient Preferences

Patients have the right to request a provider of a particular gender if it helps reduce anxiety. Healthcare facilities often strive to accommodate such preferences when possible. Open communication about comfort levels leads to a more positive experience.

Patient Comfort and Communication

Maintaining patient comfort during a prostate exam by female practitioner is essential. Providers are trained to address patient concerns, explain procedures clearly, and offer reassurance. Patients are encouraged to ask questions and express any unease before, during, or after the exam.

Tips for Reducing Anxiety

Feeling nervous before a prostate exam is normal. Following these tips may help alleviate concerns:

- Discuss any fears or questions with your provider
- Remember the exam is brief and minimally invasive
- Focus on the health benefits of early detection
- Bring a trusted friend or family member if allowed
- Practice relaxation techniques before the appointment

Preparing for Your Prostate Exam

Proper preparation can help ensure a smooth and comfortable experience during a prostate exam by female healthcare professional. No special preparation is required, but understanding the process and knowing what to expect can make a difference.

What to Do Before Your Appointment

Patients should provide a complete medical history and mention any symptoms or concerns. Avoiding heavy meals and emptying the bladder before the exam may increase comfort. Arriving a few minutes early allows time to relax and ask last-minute questions.

- Review your medical history and family background
- List current medications or supplements
- Write down any symptoms or questions
- Arrive early for your appointment

Expert Insights on Gender in Healthcare

Research shows that the gender of a healthcare provider does not impact the quality of prostate exams. Both male and female practitioners are equally qualified and undergo rigorous training in urology and general medicine. Patient outcomes are determined by the provider's expertise, communication skills, and attention to detail.

Choosing Your Provider

Selecting a healthcare professional for a prostate exam is a personal decision. Some patients prefer female providers for their communication style, while others may feel more comfortable with male practitioners. The most important factor is finding a provider who is compassionate, thorough, and attentive to your needs.

- Look for board-certified professionals
- Check experience and patient reviews
- Prioritize communication and comfort
- Express your preferences openly

Frequently Asked Questions

Many men have questions about prostate exams by female healthcare professionals. Addressing these questions can help reduce anxiety and empower patients to take control of their health.

- Is a prostate exam by female provider different from one by a male?
- Can I request a specific gender for my exam?
- How should I prepare for a prostate exam?
- Will the exam be uncomfortable?
- Are female providers as qualified as male providers?

By understanding the facts, patients can approach prostate exams by female practitioners with confidence and prioritize their prostate health without unnecessary worry or hesitation.

Q: Is there a difference in accuracy between prostate exams performed by female and male healthcare professionals?

A: No, there is no difference in accuracy. Both female and male healthcare professionals are equally trained and certified to perform prostate exams, ensuring reliable results.

Q: Can I request a female healthcare provider for my prostate exam?

A: Yes, most medical facilities allow patients to request a provider of a specific gender if it helps increase comfort and reduce anxiety.

Q: Are prostate exams by female practitioners more uncomfortable or embarrassing?

A: Discomfort or embarrassment is usually related to the nature of the exam rather than the provider's gender. Female practitioners maintain professionalism and prioritize patient comfort.

Q: What should I do if I feel anxious about having a prostate exam by a female provider?

A: Share your concerns with your healthcare provider before the exam. Open communication can help address worries and ensure a more comfortable experience.

Q: Is a prostate exam by female provider less effective?

A: No, the effectiveness of the exam is based on medical training and technique, not the provider's gender.

Q: How do female healthcare professionals ensure patient privacy during prostate exams?

A: Female professionals follow strict confidentiality protocols, maintain privacy, and respect patient dignity throughout the procedure.

Q: What happens if a problem is detected during the prostate exam?

A: If an abnormality is found, your provider will discuss next steps, which may include further tests such as PSA blood tests or imaging studies.

Q: Are there specific benefits to having a prostate exam by a female practitioner?

A: Some patients feel female providers communicate more empathetically, but the main benefit is receiving quality care from a trained professional, regardless of gender.

Q: At what age should men start getting prostate exams?

A: Men should begin prostate screenings at age 50, or earlier if they have higher risk factors such as family history or ethnicity.

Q: Can cultural or personal preferences be considered when scheduling a prostate exam?

A: Yes, healthcare providers aim to respect cultural, religious, and personal preferences when possible to ensure patient comfort and satisfaction.

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Prostate Exam by Female: A Comprehensive Guide

Feeling apprehensive about your upcoming prostate exam? Many men experience anxiety surrounding this procedure, especially when considering the possibility of a female healthcare provider performing the exam. This comprehensive guide aims to demystify the process of a prostate exam conducted by a female doctor or nurse practitioner, addressing common concerns and providing a clear understanding of what to expect. We'll cover everything from the procedure itself to addressing anxieties and ensuring a comfortable experience.

Understanding the Prostate Exam

The prostate is a walnut-sized gland located just below the bladder in men. A digital rectal exam (DRE) is the most common method for examining the prostate. During a DRE, a healthcare provider inserts a lubricated, gloved finger into the rectum to feel the prostate gland. This allows them to assess its size, shape, consistency, and to detect any abnormalities such as lumps or nodules. These abnormalities could indicate benign prostatic hyperplasia (BPH), prostatitis, or, in some cases, prostate cancer.

Why a Female Healthcare Provider Might Perform the Exam

While many men may prefer a male provider, there's no medical reason why a female healthcare professional cannot, and indeed often does, perform a DRE. Highly trained and experienced female doctors, nurse practitioners, and physician assistants are completely capable of conducting this examination with professionalism, sensitivity, and skill. In fact, some men may find a female provider more approachable or comfortable, especially when discussing sensitive health issues. The focus should always be on the provider's expertise and competence, irrespective of gender.

What to Expect During a Prostate Exam by a Female

The procedure itself is brief and relatively straightforward. The steps typically involve:

Preparation: The healthcare provider will explain the procedure and answer any questions you may have. You'll be asked to disrobe from the waist down and assume a comfortable position, usually lying on your side with your knees bent.

Lubrication: A generous amount of lubricant will be applied to the gloved finger to ensure a smooth and comfortable insertion.

Insertion and Palpation: The provider will gently insert a lubricated finger into your rectum and palpate (feel) the prostate gland. This may cause some mild discomfort or pressure, but it shouldn't

be painful.

Post-Procedure: After the exam, the provider will explain their findings and discuss any necessary next steps, such as further testing or referral to a specialist.

Addressing Anxiety and Ensuring Comfort

It's completely normal to feel nervous or anxious before a prostate exam, regardless of the provider's gender. To help alleviate anxiety:

Communication is Key: Don't hesitate to ask your provider any questions you may have before, during, or after the exam. Open communication can significantly ease anxiety.

Breathing Techniques: Deep, slow breaths can help to relax your body and mind.

Mindfulness and Meditation: Practicing mindfulness or meditation techniques before your appointment can promote calmness.

Choose a Provider You Trust: Selecting a provider you feel comfortable with can make a significant difference. Read reviews, ask for recommendations, and choose someone who prioritizes patient comfort.

Dispelling Myths and Misconceptions

One of the biggest hurdles to overcome is the discomfort or embarrassment many men feel. Let's address some common misconceptions:

Pain: While some slight pressure or discomfort is possible, a properly conducted DRE should not be painful. If you experience significant pain, inform your provider immediately.

Intimacy: The prostate exam is a purely medical procedure. It is not a sexual act and should be conducted with professionalism and respect.

Humiliation: Feeling embarrassed is understandable, but remember that your provider has seen many patients and is focused solely on your health.

Preparing for Your Prostate Exam

While no special preparation is usually required, it's helpful to:

Schedule the Appointment: Book your exam in advance to minimize stress and allow ample time.

Empty Your Bowels: Having a bowel movement beforehand can make the exam more comfortable.

Ask Questions: Prepare a list of questions you want to ask your provider.

Communicate Your Concerns: Don't hesitate to express any anxieties or concerns you have with your healthcare provider.

Conclusion

A prostate exam by a female healthcare provider is a routine and vital procedure for men's health. While apprehension is understandable, understanding the process and addressing concerns beforehand can help ensure a comfortable and positive experience. Remember, open communication with your provider is key to a successful and stress-free exam. Don't hesitate to seek clarification on anything you don't understand. Your health is paramount, and proactive healthcare is crucial.

FAQs

Q1: Is a prostate exam by a female doctor different from one performed by a male doctor? No, the procedure is the same regardless of the provider's gender. The difference lies solely in the provider's approach and your personal comfort level.

Q2: What if I experience pain during the exam? If you experience significant pain, tell your provider immediately. They will adjust their technique or stop the exam if necessary.

Q3: How often should I have a prostate exam? This depends on your age, risk factors, and family history. Discuss screening recommendations with your doctor.

Q4: What happens if something abnormal is found during the exam? Your provider will explain the findings and recommend further tests or specialist referral if necessary.

Q5: Can I bring a companion to the exam? Discuss this with your provider beforehand. Many clinics allow a companion to be present for support.

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characteristics, when available in the literature, for each test. This volume will be used by the sub specialists who perform screening tests as well as primary care practitioners who refer patients to be screened for colorectal cancer.

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prostate exam by female: Evidence-Based Physical Examination Kate Sustersic Gawlik, DNP, APRN-CNP, FAANP, Bernadette Mazurek Melnyk, PhD, APRN-CNP, FAANP, FNAP, FAAN, Alice M. Teall, DNP, APRN-CNP, FAANP, 2020-01-27 The first book to teach physical assessment techniques based on evidence and clinical relevance. Grounded in an empirical approach to history-taking and physical assessment techniques, this text for healthcare clinicians and students focuses on patient well-being and health promotion. It is based on an analysis of current evidence, up-to-date guidelines, and best-practice recommendations. It underscores the evidence, acceptability, and clinical relevance behind physical assessment techniques. Evidence-Based Physical Examination offers the unique perspective of teaching both a holistic and a scientific approach to assessment. Chapters are consistently structured for ease of use and include anatomy and physiology, key history questions and considerations, physical examination, laboratory considerations, imaging considerations, evidence-based practice recommendations, and differential diagnoses related to normal and abnormal findings. Case studies, clinical pearls, and key takeaways aid retention, while abundant illustrations, photographic images, and videos demonstrate history-taking and assessment techniques. Instructor resources include PowerPoint slides, a test bank with multiple-choice questions and essay questions, and an image bank. This is the physical assessment text of the future. Key Features: Delivers the evidence, acceptability, and clinical relevance behind history-taking and assessment techniques Eschews "traditional" techniques that do not demonstrate evidence-based reliability Focuses on the most current clinical guidelines and recommendations from resources such as the U.S. Preventive Services Task Force Focuses on the use of modern technology for assessment Aids retention through case studies, clinical pearls, and

key takeaways Demonstrates techniques with abundant illustrations, photographic images, and videos Includes robust instructor resources: PowerPoint slides, a test bank with multiple-choice questions and essay questions, and an image bank Purchase includes digital access for use on most mobile devices or computers

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The FDA approved the PSA test in 1986 as a monitor for treatment response and disease recurrence. Later in 1994 the FDA approved the PSA test as a screening tool for prostate cancer. But the question remained: what was the best treatment tool? I am reviewing 9 different treatment approaches in this book. They are all currently in use by different physicians. But they do not necessarily serve the patient best. Brachytherapy does not quite do it. It improves the cancer for a period of time, and after a few years it returns with a vengeance. The radical prostatectomy and the robotic prostatectomy have helped a significant amount of patients. But long-term studies show that there can be a recurrence rate of as much as 25 to 30%. In addition there are significant side effects like a killed sex life and involuntary dribbling of urine, if the bladder outlet was injured during the surgery. Quite often urologists recommend active surveillance. This approach to prostate cancer means that a 71 to 75 year old prostate cancer sufferer is kept in suspense by the urologist. An initial rectal biopsy is done with a histology assessment where a Gleason score is analyzed. If this score is 6 or less, the cancer is presumed to be less aggressive and active surveillance is done. Another biopsy is done 1 year later and this could go on until the patient dies of a heart attack or a stroke. I think that prostate cancer should be treated early before metastases develop and the cancer gets out of control. There are other methods that actually can get rid of the prostate cancer, for instance cryoablation therapy following a mapping biopsy. In this latter method 60 biopsies are placed like a grid through the entire prostate gland to identify the exact location where prostate cancer has developed. This is done through the perineum (between the scrotum and the anal opening). Prostate cancer can often be multifocal: there may be two or three areas where prostate cancer is located. One month after the mapping procedure probes are introduced in the same way, through the perineum and the identified cancer lesions are treated with cryotherapy twice. I am explaining this in chapter 15 in more detail. According to Dr. Onik, an interventional radiologist in Ft. Lauderdale, active surveillance is something that should be abandoned. Instead the following treatment approach should be adopted. 1. A rising PSA or single PSA above 30 should trigger a referral for a mapping biopsy through the perineal approach under a general anesthetic. The treating physician can sterilize the area and perform biopsies in a sterile fashion, which prevents infection. This is a huge advantage above the standard transrectal approach, which can lead to infections like prostatitis and blood poisoning. 2. Based on the result of the mapping biopsy targeted ablation cryotherapy is performed one month later eradicating all the cancer foci determined through the mapping biopsy. 3. Follow-up PSA levels are obtained every three months for 2 years. If the PSA is less than 3.0, the patient is considered cured. If there is a rising PSA level point 1 and 2 above are repeated until a cure is achieved. Dr. Gary Onik published a 10-year follow-up study that had a 100% survival rate and a 94% cure rate in 70 men with prostate cancer. The reason for such good results is that attention is paid to detail, to the exact location of the cancer and that all cancer is completely eradicated. In my opinion this is the new blueprint of a common sense approach to prostate cancer. Read more details about this in chapter 15. Apart from the above mentioned treatment methods I reviewed external beam radiotherapy, laser ablation therapy and high-intensity focused ultrasound treatment. I noticed that the long-term cure rates over 10 years differ considerably from one treatment modality to the next. All of this is reviewed in detail in this book.

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him, she is haunted by a familiar face. What was intended to be a fetish fix, turns into a mission of revenge. Warning: This 19,000 word story contains graphic language, erotic situations, oral sex, straight sex, male submission, medical play, anal play, orgasm denial, prostate play, enema play, penis milking, exhibition (F/F), voyeurism, domination, submission, humiliation, medical fetish, doctor/patient sex, sex with medical instruments, and is a story for adults (18+)

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a medical malpractice trial attorney, hospital risk manager, and healthcare educator, its unique holistic approach provides real-world practical solutions in a concise, easy-to-read, and entertaining format. No other book in the field has been written by someone with equivalent “boots on the ground” experience. And the author’s original cartoons are sure to bring a smile to every reader’s face. The Mumbo Jumbo Fix contains up-to-date content including communication strategies in the post-Covid world, telemedicine's expanded use since the pandemic, patient preparation for the office visit and hospital stay, provider interaction with families, and talking to the transgender population. Written in plain English without linguistic mumbo jumbo, the book's true stories and evidence-based suggestions offer the needed healthcare communication fix. **REVIEWS and WORDS OF PRAISE** The Mumbo Jumbo Fix hits a home run! [An E]xcellent book by an eminently qualified author who has lived it. Easy to read, organized with many valuable insights and vignettes.... Patients who read this book will end up improving their chances of the best outcome the profession offers. ---Dominick Addario, MD, Psychiatrist, Diplomate, American Board of Psychiatry and Neurology, Distinguished Life Fellow, American Psychiatric Association, Health Sciences Clinical Professor, University of California San Diego Easy to read, and systematic approach to maximizing on first principles of communication in healthcare, and more broadly.... The book does not take itself too seriously, with a smattering of cartoons thrown in to make the subject light-hearted, but relevant and relatable. I highly recommend this book to all physicians, nurses, and others who support them. --Javed Siddiqi, HBSc, MD, DPhil (Oxon), FRCSC, FACS, FAANS, Neurosurgeon, Chief of Neurosurgery, ARMC, RUHS, RCH & DRMC, Professor & Chair, Dept of Surgery, California University of Science & Medicine, Founding Journal Editor, Contemporary Reviews in Neurology & Neurosurgery, President Elect, California Association of Neurological Surgeons The Mumbo Jumbo Fix is a long overdue resource for healthcare professionals, patients, and families. This book presents communication strategies in a clear and often humorous format.... Medical and nursing programs should include this book as a required text for improved communications skills. --Elsa L. Murdoch, DNP, MSN, RN, CPHRM, Assistant Professor, RN-BSN Program Director, Azusa Pacific University Who better to see the many problems of doctor-patient-nurse communication than an experienced medical malpractice attorney? Mike Grace has seen and heard it all. The Mumbo Jumbo Fix is loaded with entertaining and revealing stories of miscommunication between doctors and nurses and between both and patients.... It is a must read for both health professionals in training and those with experience. --Joseph E. Scherger, MD, MPH, Family Practice Physician, Primary Care 365 Physician Core Faculty, Family Medicine Residency Program, Eisenhower Medical Center, Clinical, Professor of Family Medicine, Keck School of Medicine, University of Southern California An absolute must read for anyone who wants to improve communication and patient relationships. A comprehensive communication guide. Even the most seasoned healthcare professional will benefit from reading this book. --Nicholas Wade, BSN, MPH, CEAS, Public Health Nurse, West Bay Area Director of Employee Health Service & Workers Compensation, Sutter Health The book was very worthwhile, easy to read, concise, and entertaining which holds all healthcare workers’ attention. I appreciated the cartoons... I found myself smiling or laughing aloud at times. This book’s subject has a role in the education of medical students and all healthcare workers. --Lori J. Beck, DNP, Nurse Practitioner, Indiana University Health [V]ery eloquently written.... [W]itty comical illustrations....[A]n easy read that can be read in one sitting or multiple sittings because you can pick right back up where you left off.... --Karen Seessengood, MSN, RN, CNOR, CST/CSFA, Nurse Perioperative Educator, Founder, Seessengood Perioperative Education and Consulting, Princeton, IN, Staff RN/ Perioperative Educator, Surgery Department, Logansport Memorial Hospital

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including some surprising research, Dr. Ofri offers up an unflinching look at the impact of emotions on health care. Dr. Ofri takes us into the swirling heart of patient care, telling stories of caregivers caught up and occasionally torn down by the whirlwind life of doctoring. She admits to the humiliation of an error that nearly killed one of her patients. She mourns when a beloved patient is denied a heart transplant. She tells the riveting stories of an intern traumatized when she is forced to let a newborn die in her arms, and of a doctor whose daily glass of wine to handle the frustrations of the ER escalates into a destructive addiction. Ofri also reveals that doctors cope through gallows humor, find hope in impossible situations, and surrender to ecstatic happiness when they triumph over illness.

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identity can be summed up in the management of three critical relationships: your relationship with God, your relationship with you, and your relationship with others. Through these relationships we learn, develop, and cement our habits and personalities. Between You, God, and Me explores each of these relationships from a spiritual perspective, using practical knowledge to expose the traps often used to destroy unity of mind, body, and spirit. Each lesson will take you on a journey in discovering the depth and beauty of God's love, the necessity of self-love, and your role in expressing God's love toward your family, friends, and colleagues. This is not your typical devotional! Each lesson will arouse your emotions, challenge your beliefs, and force you to acknowledge thought patterns and behaviors that prevent you from living a life of purpose. Using biblical and scientific evidence, you

will discover God's plan and purpose for your life; recognize attitudes that prevent you from succeeding in your goals, and identify tools to help you create a joyful, stress-free, existence. For a few minutes each day, Eve will accompany you as you uncover God's love while preparing you to live a life of liberty, harmony, and peace. Between You, God, and Me is a powerful devotional tool intended to help you celebrate your intimate relationships and foster positive change within your life.

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their microscopic origins, the chronology of research and medical treatment, the body parts affected, and the modern-day methods of diagnosis, treatment, and prevention of spread. Additionally, this work addresses legal implications of disease transmission, psychosocial impacts, as well as long-term medical consequences such as potential infertility, pelvic inflammatory disease, and chronic pelvic pain.

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