

Hemospermia: Patient Information

Hemospermia is the presence of blood in the semen. The semen is composed of secretions from the testes, epididymis, urethral glands, prostate gland, and seminal vesicles. The clear secretions from the urethral glands account for a tiny amount of the semen, the milky white prostate gland secretions account for a small amount of the semen, and the viscous secretions from the seminal vesicles account for the majority of the semen.

Hemospermia is not uncommonly encountered in men and usually results from prostate or seminal vesicle inflammation. It is almost always benign and self-limited, resolving in several weeks. **IT IS RARELY INDICATIVE OF ANY SERIOUS UNDERLYING DISORDER, AS FRIGHTENING AS IT IS TO SEE THE PRESENCE OF BLOOD IN THE EJACULATE!** In a very small minority of individuals, hemospermia may become recurrent or chronic, causing great concern and anxiety.

Hemospermia may cause blood in the initial, middle, or terminal portion of the ejaculate. Typically, blood arising from the prostate occurs in the initial portion, whereas blood arising from the seminal vesicles occurs later. The color of the semen can vary from bright red, indicative of recent or active bleeding, to a rust or brown color, indicative of old bleeding.

Evaluation for hemospermia involves a digital rectal examination of the prostate to check the size and consistency, a urinalysis to check for urinary infection and blood in the urine, and a PSA (prostate specific antigen) blood test.

Hemospermia is managed with oral antibiotics. Only if the bloody ejaculations fail to respond is further workup required. This may involve prostate sonography with possible prostate biopsy and cystoscopy. Prostate sonography, done by the trans-rectal route, will commonly show dilated seminal vesicles, ejaculatory duct cysts, and ejaculatory duct or seminal vesicle stones. Cystoscopy, a visual inspection of the lower urinary tract with a small-caliber, flexible instrument will enable inspection of the inner aspect of the prostate and urinary bladder.