Blood in semen, also called haematospermia, can happen to men at any age after puberty. It is most common in men aged 30 to 40 years and in men over 50 years of age with benign prostate enlargement. Most cases go away in time without treatment.

**Is it normal for blood to be in semen?**

Blood in semen (haematospermia) is not normal but is quite common and can appear as either a brownish or red colour in the semen. For most men it is painless and is noticed after ejaculation.

Up to 9 in 10 men (90 per cent) who have had blood in their semen have repeated episodes.

**Should I worry about finding blood in my semen?**

Men are often worried when they find blood in their semen but it is not usually a sign of a serious problem. However, it is important to see a doctor if you notice any blood in your semen.

**What causes blood in semen?**

The male reproductive system is made up of the testes, a system of ducts (tubes) and other glands that open into the ducts. Sperm are made in the testes. At orgasm, waves of muscle contractions transport the sperm, with a small amount of fluid, from the testes through to the vas deferens. The seminal vesicles and prostate contribute extra fluid to protect the sperm. This mixture of sperm and fluid (semen) travels along the urethra to the tip of the penis where it is ejaculated (released). Bleeding can happen anywhere along the way.

Blood in semen may be caused by inflammation, infection, blockage, or injury anywhere along the male reproductive system. As the seminal vesicles (a pair of pouch-like glands located on either side of the bladder) and the prostate are the main organs that contribute the fluid to the sperm, an infection, inflammation or trauma in either of these organs can cause blood in the semen.

Blood can be found in semen as a symptom on its own (primary haematospermia) or linked to other symptoms (secondary haematospermia).

**Can blood in semen be caused by injuries or rough sex?**

Blood in semen can be noticed during/after sex, but rough sex is not the cause of the bleeding. Severe trauma to the genital/urinary tract can cause blood from the urethra but this is different to haematospermia.

**Can blood in semen be caused by sexually transmitted infections?**

Blood in semen is very unlikely to be caused by any sexually transmitted infection (STI). Some STIs can be transmitted through blood and semen, but they do not usually cause blood to appear in semen.

**What is primary haematospermia?**

Primary haematospermia is when blood in the semen is the only symptom. No blood is found in the urine, and a physical examination does not find any other problems. If there is blood in semen but no other symptoms, it is common for no cause to be found.

**What is secondary haematospermia?**

Secondary haematospermia is when there is a suspected or known cause for the bleeding, such as after a prostate biopsy or a urinary or prostate infection or, in rare cases, if cancer is present. Blood in semen can also happen in men over 50 years of age with benign prostate enlargement (BPH) with calcifications (deposits of calcium) that can be seen on ultrasound.
In very rare cases, secondary haematospermia can be caused by tuberculosis, parasitic infections, or any diseases that affect blood clotting such as haemophilia and chronic liver disease, and some medications that thin the blood.

An ultrasound-guided biopsy of the prostate can cause blood in semen in about one third of men. It is very rare for cancer of the testes to be linked with blood in semen.

Prostate cancer can cause blood in semen; however, most men with prostate cancer do not have this symptom unless they have had a prostate biopsy that has caused the blood.

What should I do if I find blood in my semen?

If you have blood in your semen, make an appointment to see your local doctor and think about the following questions:

- How much blood is in the semen – is the ejaculate a very red colour or are there just flecks?
- Have you ever noticed blood in the past?
- When was blood first noticed? Is blood present all the time?
- How many times have you noticed blood in your semen?
- Is there anything that seems to have caused this symptom?
- What other symptoms do you have, if any?

How does a doctor confirm blood in semen?

To confirm that there is blood in the semen, a doctor will first do a physical check-up, including a genital and prostate (back passage) examination.

A semen sample may be needed to check the amount of blood in the ejaculate.

The doctor will also examine a urine sample to make sure no blood is present, either seen with the eye or under the microscope, and will check for signs of a urinary tract infection.

If other causes of blood in semen are suspected, what tests are done?

If blood is found in the urine (seen by the eye or through a microscope), or if blood in semen is linked with symptoms of a urinary tract infection, you should see a urologist (a surgeon who specialises in diseases of the urinary tract in men and women, and the genital organs of men) for further tests.

These further tests include a CT scan or ultrasound of the urinary tract, as well as a cystoscopy (using a cystoscope, a long, very thin tube with a camera and light at the end) examination of the bladder and prostate.

A digital rectal examination, where the doctor places a gloved finger into the man’s rectum (back passage) to check the size, shape and feel of the prostate, and a prostate specific antigen (PSA) blood test are needed to investigate blood in semen. If these tests are abnormal then an ultrasound and prostate biopsy may be necessary to exclude prostate cancer.

How is blood in semen treated?

Primary haematospermia does not usually need treatment when blood in the semen is the only symptom generally clears up without treatment and does not increase the risk of other diseases; you will not be putting your sexual partner at risk.

How is blood in semen treated when other symptoms are present?

Treatment for secondary haematospermia will vary, depending on the other symptoms and the underlying cause. Some examples of treatment for specific causes include:

- minor injuries – treated with rest and monitoring symptoms
- major injuries – may need surgery
- infections – can often be treated with antibiotics
- blockages – are usually treated with specific medicines
- in the rare case of prostate cancer – surgery, radiation or hormonal therapy may be needed.

If you are over the age of 40 and continue to have blood in your semen, especially if there are also other symptoms, please see a urologist (note that you will need a referral from a GP to see a urologist).

For more information visit www.andrologyaustralia.org, call 1300 303 878, or speak to your doctor.