## MEN'S PELVIC HEALTH

# PHYSICAL THERAPY MANAGEMENT FOR SEXUAL DYSFUNCTION IN MEN

his is probably not a topic that is discussed openly in men's locker rooms, nor maybe in the privacy of your own home. Sexual dysfunction is estimated to affect 31% of men and can have a huge impact on your quality of life and your relationships. The term 'sexual dysfunction' refers to any complication occurring during the sexual response cycle. That includes desire, arousal, orgasm and resolution (return to flaccid state after arousal). Few people seek help as many, even healthcare professionals, are often embarrassed and hesitant to discuss the topic; yet effective treatment is available to help remedy the situation.

The four main categories of sexual dysfunction are desire/interest, arousal, orgasm and sexual pain. Sexual dysfunction can include:

- sexual desire dysfunctions;
- sexual arousal dysfunctions;
- erectile dysfunction;
- premature ejaculation;



- anejaculation (inability to ejaculate);
- orgasmic dysfunction;
- priapism (persistent and painful erection of the penis); and
- Peyronie's disease (a bent, rather than straight, erect penis due to scar tissue, which can be painful).

Of these listed above the most common are erectile dysfunction (5–20% of men) and premature ejaculation (20–30% of men).

### HOW DOES SEXUAL DYSFUNCTION MAKE YOU FEEL?

We are not talking necessarily about the physical feeling of arousal and orgasm, although having a healthy sexual relationship with your partner is important and the release of hormones has positive effects on your body. The effect of sexual dysfunction is different for everyone, but you might feel:

- a lack of confidence;
- worried about your future;
- that you seem less attractive to your partner;
- ashamed;
- worried about your health;
- embarrassed;
- scared about talking to a doctor or medical professional;
- frustrated that this is happening to you; and
- isolated and not wanting an intimate relationship.

This can have a large impact on your mental health. Sexual dysfunction is a private thing, so it can be hard to talk about it. If you're worried about it, it might help to talk to a trusted friend or family member. That may not be appropriate in some cultures, so contact a support group or your doctor for help. Effective treatments are available that will help both the physical and emotional effects of sexual dysfunction.

#### RISK FACTORS ASSOCIATED WITH SEXUAL DYSFUNCTION

Risk factors associated with sexual dysfunction include:

- psychological conditions (eg. depression, anxiety and the medication used to treat these conditions);
- medical conditions (diabetes, heart disease, stroke, urinary tract disorders and other chronic illnesses);
- substance abuse;
- increasing age;
- prostate cancer;
- surgical complications in the pelvic region; and
- chronic prostatitis/chronic pelvic pain syndrome.

### HOW PHYSICAL THERAPY CAN HELP YOU

In some cases doctors may need to prescribe medication to help correct the dysfunction: surgery may even be



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an option, as well as devices to facilitate erection. If there is an underlying cause from an illness or injury this may need additional medical attention. Once any cancer and/or urethral (bladder) complications have been ruled out then physical therapy can start.

The pelvic floor muscles form a dome-shaped structure that encloses the pelvic cavity. That's the area from your penis (in the front) to your anus (at the back) and the area between your legs (left to right). The pelvic floor muscles stabilise your pelvis (base of support for your spine and hips); support your internal organs; contract to control your bladder and bowel, and to regulate your erection, emission and ejaculation. Biofeedback and electrical stimulation are additional treatments that help build endurance and correct sequencing of muscle contractions around your pelvis. They include pelvic floor exercises, with the use of small electrodes applied to muscles ensuring adequate contraction. These techniques are commonly used with women after pregnancy, childbirth and menopause to re-train their pelvic floor muscles too.

Physical therapists that are specialised in the pelvic floor can complete a pelvic floor palpation and feel for trigger points in muscles. Research has shown that pelvic floor muscle training is effective in treating erectile dysfunction, ejaculation complications and chronic pelvic pain: Erectile dysfunction. Between 9 and 40% of men struggle with erectile dysfunction by the age of 40 and this number rises by 10% for each decade after 40. Erectile dysfunction is the inability to either obtain and/or maintain a rigid erection sufficient for penetration. Strengthening the pelvic floor muscles can help produce and sustain an erection. The opposite to this is that high muscle tone (spasm of these muscles) can prevent adequate blood flow necessary for erection, and therefore learning how to relax your pelvic floor muscles may help your condition. Studies have shown that 47% of men with erectile dysfunction recovered completely following a 4–12-month programme including pelvic floor exercise, biofeedback and electrical stimulation.

Ejaculatory dysfunction. During ejaculation, the smooth muscles of the prostate and around the bladder contract. Pelvic floor exercises, biofeedback and electrical stimulation are proven to improve control and duration delaying or preventing premature ejaculation. Behavioural changes are also beneficial and include preintercourse masturbation, frequent sexual activity or stopping intercourse intermittently with sustained contraction/ internal squeeze. Research shows that 61% of men with premature ejaculation improved their control of ejaculation following 15–20 sessions of the pelvic floor training.

Original Chronic prostatitis/chronic pelvic pain syndrome. This is chronic pain in the pelvic and/or genital

area without symptoms of underlying disease or infection. Patients who suffer from this condition report pain is experienced most often during or after ejaculation. Relaxation techniques may be required for muscles that may be in spasm. Biofeedback methods to improve co-ordination of the pelvic floor muscles can be extremely beneficial in men with these conditions.

Education regarding lifestyle and behavioural changes will be beneficial. Watching your diet, drug use (therapeutic and recreational drugs), alcohol intake, maintaining a healthy weight and being physically active will go a long way to improving your sexual dysfunction symptoms. A physical therapist can advise on steps to take in many of these areas.

Physical therapists with specialised pelvic floor training can offer additional treatment techniques to address underlying problems of muscle spasm. These include myofascial release and selfrelease education; trigger point therapy and global therapeutic massage.

Depression and anxiety are real consequences of sexual dysfunction. Likewise depression and anxiety feed into a negative cycle where your mental health can affect your physical performance. Bravely speaking about your problem, reaching out for help, advice and support will make a huge difference to the quality of your life and your relationships.

Emphasis on pelvic floor rehabilitation is traditionally associated with women; however, pelvic floor dysfunction is also common among men. Physical therapy management can be effective in treating many conditions such as; erectile dysfunction, ejaculatory dysfunction, chronic prostatitis/chronic pelvic pain syndrome and urinary incontinence.





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