Pelvic Floor Muscles Exercises (PFME) for men after radical prostatectomy

What are the Pelvic Floor Muscles?
The floor of the pelvis is made up of layers of muscle and other tissues. These layers stretch like a hammock from the tail-bone at the back to the pubic bone at the front.

A man’s pelvic floor supports the bladder and the bowel. The urethra (water pipe) and the rectum (back passage) pass through the pelvic floor muscles. The pelvic floor muscles play an important role in bladder and bowel control.

Pelvic floor exercises strengthen the pelvic floor muscles and improve control of the bladder and the bowel

Pelvic Floor Muscles and Incontinence after Radical Prostatectomy

The prostate gland sits at the base of the bladder at the point where the bladder and urethra tube join. Situated at this junction is the bladder neck sphincter – a camera-shutter like band of muscle that tightens automatically to prevent urine leaking out from the bladder.

There is another sphincter below the prostate made up of ring like muscles in the urethra and the muscles of the pelvic floor. This is known as the urinary sphincter. So there are two sphincters working to keep urine in the bladder until you decide to pass urine.

The bladder neck sphincter can be damaged during surgery. This means that following the surgery you rely on the strength on the urinary sphincter. The pelvic floor muscles are the mainstay of this sphincter. If they are weak, you may experience incontinence of urine.

How to identify your Pelvic Floor Muscles

- Imagine trying to stop passing wind you can do this either lying down, sitting or standing with your legs apart. Squeeze the muscle around your back passage as though you were trying to stop passing wind. Relax then repeat the squeeze and let go a couple of times. Your thigh, bottom and stomach muscles should all stay relaxed when doing the exercises

- Stopping the flow of urine: When your go to the toilet to pass urine, try stopping the flow of urine then start it again. You may find that you do not stop the urine flow completely but slow it down. If you are able to either stop or slow the flow you are squeezing the correct muscles! Do not do this after you can identify the muscles as you may disturb the bladder’s emptying processes

If you are doing the exercises correctly you will feel a distinct ‘squeeze and lift’ in the urethra, back passage and above your scrotum. You also should feel a sensation of ‘letting go’.

Pelvic Floor Muscle Training Program

Need to establish an exercise regime which includes training Pelvic Floor Muscles for:

- Endurance: how long you can hold each contraction. You squeeze the pelvic floor muscles and hold on till maximum of 10 counts/seconds, then relax for the some
time. If you can only hold on to 2 or 3 counts, don’t be despair. You can increase the contraction time once you improve. Do this 5 times in a row

- **Strength**: how strong your muscle is that you squeeze the pelvic floor muscles strongly and relax it straight away. Do this 5 times in a row
- **Knack**: the contraction to counteract the increase in abdominal pressure you need to practice squeezing the pelvic floor muscles just before and during activities: cough, sneeze, getting up from a chair. Do this at least once a day
- **Urge control techniques**: suppress the urge to pass urine by strongly contracting the pelvic floor muscles (1) and think of something else to take your mind off going to the toilet

Most men find it difficult to remember to do the exercises. You can do the exercises every 2 hours during the day or just before a meal, e.g. before breakfast, morning tea, lunch, afternoon tea, dinner and supper

**When should I start these exercises?**

4 to 6 weeks before surgery (2) is a good time to practice pelvic floor exercises. This will also take your mind of worrying about the surgery. Give you something to work on to improve your bladder control. The advantage of training before surgery is that you learn how to control your muscles when you are pain-free and sensation is normal. These exercises will prepare you in advance to begin using the muscles immediately after catheter removal (3)

Try doing them in different circumstances such as while walking, playing sport or exercising. You can get a good idea of how it should work and look during this time.

After surgery, while the catheter is still in place, doing pelvic floor exercises can irritate the catheter and cause discomfort. Don’t do too many deliberate pelvic floor contraction.

Once the catheter is out start Pelvic Floor Muscles Exercises straight away

As doing the exercises gets easier, do them in different positions: from sitting to standing and on to walking.

Over time you will only be leaking when you exert yourself. Identify the times that the bladder gives that little “squirt” and try to anticipate it. Pull up the pelvic floor just before it happens. If it happens during your chosen sport you may need to practice the movement involved so that pulling up the pelvic floor muscle becomes automatic.

**Managing the incontinence**

The first few weeks following surgery you may experience severe incontinence. Being prepared for this possibility is perhaps the most important step to effectively mange the problem. It can take up to 12 months for the incontinence to completely resolve.

Sometimes, urinary incontinence will persist beyond the usual 3-6 month time frame. If this does occur, it would be worth discussing with your urologist the options available to you. Please don’t suffer in silence more than you have to, talk to someone who can help.

*‘Continence Products after Radical Prostatectomy’ see separate info sheets*
Where you can get help and advice about your incontinence?

Continent Nurse Advisors can give you advice on how best to manage the incontinence and teach you pelvic floor exercises. 
Continece Physiotherapists can work with you to strengthen your pelvic floor muscles.
Call the National Continence Helpline 1800 33 00 66 to find your local Continence Nurse Advisor and Continence Physiotherapist
The National Continence Helpline is a confidential service staffed by trained Continence Nurse Advisors operating Monday to Friday 8 am to 8 pm. This service provides advice and information on specific continence problems and can offer advice about continence products.

References:

(1) Katelaris, P. & Katz, T. Bladder rehabilitation after prostate cancer treatments, Medical Observer, 19 Nov. 2004,
(3) Burgio KL et al. 2006, Preoperative biofeedback assisted behavioural Training reduce post prostatectomy incontinence: a randomized, controlled trial, J. Urol 175: 196 -201

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