Pelvic floor exercises in men: Frequently asked questions

What is the pelvic floor and why does it become weak?

Many men experience a variety of problems with their urinary system leading to unwanted leakage of urine. Some also have difficulty controlling wind or leakage from the lower bowel. Often this is due to weakness of the muscles of the pelvic floor which have an important function in preventing these problems.

The floor of the pelvis is made up of layers of muscle and other tissue, stretching from the tail bone (coccyx) at the back to the pubic bone in front. A man’s pelvic floor supports the bladder and bowel. The urethra (water pipe) and the rectum (back passage) pass through the pelvic floor muscles (see the diagram).

Why do the pelvic floor muscles get weak?

The pelvic floor can be weakened by:

- Some operations for an enlarged prostate gland
- Repeated straining to empty your bowels, usually due to constipation
- Repeated heavy lifting
- A chronic cough such as a smoker’s cough, chronic bronchitis or asthma
- Being overweight
- Lack of general fitness

Neurological damage (eg after a stroke, after spinal injury and as a result of multiple sclerosis or diabetes) can also produce poor bladder function. Men in these groups should seek advice from a healthcare professional.

Pelvic floor exercises are an important part of preparation prior to surgery for removal of the prostate for cancer (radical prostatectomy). They ensure that the muscles holding urine
in the bladder are in good condition; they also reduce the amount and duration of any urinary incontinence after the operation.

**How do I contract the pelvic floor muscles?**

The first thing you need to do is to identify the muscles that need to be exercised:

- Sit or lie comfortably with the muscles of your thighs, buttock and abdomen relaxed
- Tighten the ring of muscle around the back passage as if you are trying to control diarrhoea or wind. Relax the muscle again. Practice this movement several times until you are sure you are exercising the correct muscles. Try not to squeeze you buttocks, tighten your thighs or contract your tummy muscles.
- Imagine you are passing urine, trying to stop the flow in mid-stream and then restarting it. If your technique is correct, you will feel the base of your penis move upwards slightly towards your tummy. You can do this ‘for real’ while passing urine but do not do this more than once a week to check your progress, otherwise it may interfere with normal bladder emptying.

**The exercise programme**

A pelvic floor contraction is performed by closing and drawing up your front and back passages. Imagine you are trying to stop yourself from passing wind and at the same time try to stop the flow of urine. The feeling is one of ‘squeeze and lift’.

You can do this lying, sitting or standing. You can see if you are contracting the correct muscles by standing in front of a mirror and if you are contracting the correct muscle you will see the penis and testicles lift.

Start gently and stop if it hurts.

**Don’t**

- Pull in your tummy muscles excessively
- Squeeze your legs together
- Tighten your buttocks
- You should aim to perform at least 10 contractions of the muscles, up to 6 times during the day, every day.
- Muscles only develop when you challenge them to work harder than normal. This will be different for everyone.
- Develop a habit of bracing your pelvic floor muscles gently during everyday activities (lifting, carrying and during strenuous exercise) and particularly during any task which might challenge the bladder or put pressure through the pelvis.
- Do not exercise using the pelvic floor muscles to stop and start the flow of urine as it may interfere with normal bladder emptying.

**Other information**

This patient information leaflet provides input from specialists, the British Association of Urological Surgeons, the Department of Health and evidence based sources as a
supplement to any advice you may already have been given by your GP. Alternative treatments can be discussed in more detail with your urologist or specialist nurse.

Who can I contact for more help or information?

**Oncology nurses**

**Uro-oncology nurse specialist**
01223 586748

**Bladder cancer nurse practitioner (haematuria, chemotherapy and BCG)**
01223 274608

**Prostate cancer nurse practitioner**
01223 274608 or 216897 or bleep 154-548

**Surgical care practitioner**
01223 348590 or 256157 or bleep 154-351

**Non-oncology nurses**

**Urology nurse practitioner (incontinence, urodynamics, catheter patients)**
01223 274608 or 586748 or bleep 157-237

**Urology nurse practitioner (stoma care)**
01223 349800

**Urology nurse practitioner (stone disease)**
01223 349800 or bleep 152-879

**Patient advice and liaison service (PALS)**
Telephone: +44 (0)1223 216756
PatientLine: *801 (from patient bedside telephones only)
E mail: pals@addenbrookes.nhs.uk
Mail: PALS, Box No 53
Addenbrooke’s Hospital
Hills Road, Cambridge, CB2 2QQ

**Chaplaincy and multi faith community**
Telephone: +44 (0)1223 217769
E mail: chaplaincy@addenbrookes.nhs.uk
Mail: The Chaplaincy, Box No 105
Addenbrooke’s Hospital
Hills Road, Cambridge, CB2 2QQ

**MINICOM System (‘type’ system for the hard of hearing)**
Telephone: +44 (0)1223 217589

**Access office (travel, parking and security information)**
Telephone: +44 (0)1223 596060
We are now a smoke-free site: smoking will not be allowed anywhere on the hospital site. For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169.

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patient.information@addenbrookes.nhs.uk.

Please note: We do not currently hold many leaflets in other languages; written translation requests are funded and agreed by the department who has authored the leaflet.

Document history
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