

Post Prostatectomy Rehabilitation Program

A PATIENT'S GUIDE



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POST PROSTATECTOMY INCONTINENCE REHABILITATION

What is incontinence?

Incontinence is the loss of bladder control.

Why do men develop incontinence after prostatectomy?

During a radical prostatectomy one of the valves (sphincters) that controls the flow of urine from the bladder is removed. The pelvic floor muscles and adjacent nerves may also be affected.

What can be done to treat incontinence?

Kegel exercises are a way to strengthen the pelvic floor muscles, helping a man regain control of his bladder and urine flow. These can be started before surgery. After surgery Kegels should be performed once your catheter has been removed.

How long does incontinence last?

Incontinence typically begins to improve after 4-6 weeks of regular Kegel exercises. It may take up to a full year to regain complete bladder control. In rare cases, mild incontinence can persist and further treatment options can be discussed with your provider.



HOW TO PERFORM KEGEL EXERCISES

Step 1: Identify the pelvic floor muscles

During urination attempt to stop the flow of urine midstream. You may also try to isolate the muscles that prevent you from passing gas. These muscles are the ones you need to strengthen during Kegel exercises.

Step 2: Improve your technique

Tightly contract the pelvic floor muscles and hold for 5-10 seconds. Your penis and testicles should lift slightly. Avoid tightening the muscles of your abdomen, buttocks or legs. Do not hold your breath. Relax for 5-10 seconds. This is one repetition. It may be easiest to practice while lying down. As your technique improves you may try performing Kegels while sitting, standing or walking.

Step 3: Start a daily pelvic exercise routine

Aim for at least 3 sets of 10 repetitions per day. Remember it will take time to see results. You may also find it helpful to perform a Kegel when you change position or lift something heavy to prevent urine leakage.

What can be done if progress stalls or incontinence persists?

Your provider may recommend a referral to a pelvic health physical therapist. Alternatively, your provider can discuss surgical options such as an artificial urethral sphincter or sling.



POST PROSTATECTOMY ERECTILE REHABILITATION

What is erectile dysfunction?

The inability to attain or maintain an erection sufficient for satisfying sexual activity.

Why do men develop erectile dysfunction after prostatectomy?

Surgery can affect the nerves and blood vessels that allow you to have an erection. Your ability to have an erection after surgery will depend on the proximity of the cancer to the nerves that control erections, your pre-operative erectile function, your age and other comorbidities.

How long does erectile dysfunction last?

This is different for each man. In general, most men will not have any erections immediately following their surgery. Erectile function returns gradually and for most men it will return between 6 to 12 months after surgery. For some men it may take up to two years. You may never reach the level of function you had prior to surgery.

What is the purpose of rehabilitation?

To preserve the health and minimize damage to the tissues responsible for erections during the post-operative recovery period. As an added bonus it allows you to be able to be sexually active.

What is involved in post-prostatectomy erectile rehabilitation?

- PDE-5 Inhibitor (pills):
- Injection Therapy 2-3x per week
- Vacuum Erection Device (VED) on days not using injection therapy



When should I start rehabilitation?

You may start taking pills as soon as you return home following surgery. Other therapies should begin one month after your surgery, unless otherwise instructed by your surgical team.

Are there other things I can do to help erectile dysfunction?

Maintaining a healthy lifestyle by exercising, eating a healthy diet, consuming alcohol in moderation, decreasing stress, getting enough sleep and not smoking all help in restoring your erections.

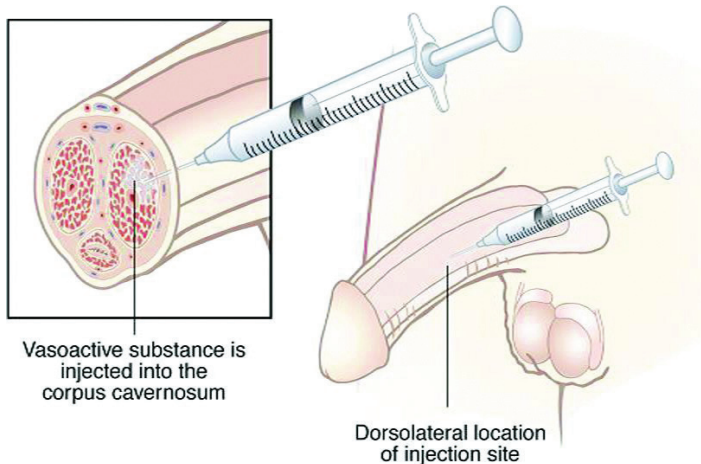
How will orgasms be different after my erections return?

The most notable change is that there will be no ejaculate when you have an orgasm because the prostate makes this fluid. This means you will no longer be able to father a child after surgery. There may also be some changes in the sensation of orgasm.

Are there other options if Erectile Rehabilitation is not effective?

A penile implant (prosthesis) is another option for treatment of erectile dysfunction. Talk to your care team if you would like more details.

PENILE INJECTIONS



Step 1: Wash your hands

Step 2: Prepare the medication

- Clean the top of the medication vial with an alcohol swab
- Pull back the plunger on the syringe to fill it with air equal to the dose you will be administering
- Uncap the needle and insert the needle into the rubber center of the vial
- Depress the plunger injecting air into the vial
- Turn the vial upside down and pull back the plunger drawing up the medication dose
- Remove the syringe from the vial
- Pointing the needle upward, push out any air from the syringe

Step 3: Select your injection site

- You will be injecting along the sides of the shaft. Your provider will show you the appropriate area
- Grasp the end of the penis pulling straight out from the body ensuring you are not twisting the shaft

- Alternate sides with each injection
- Move up and down the shaft of the penis moving 1cm from your previous injection site
- Choose a spot where there are no visible veins
- Never inject the top, bottom or head of the penis

Step 4: Prepare the injection site

- Cleanse the injection site with an alcohol swab

Step 5: Inject the medication

- With one hand, hold the penis stretched so the skin on the shaft is taught
- With the opposite hand hold the syringe between your thumb and first finger (like a pen)
- Insert the needle at a 90 degree angle, burying the needle to the plastic
- Using your thumb, depress the plunger to inject the medication

Step 6: Remove the needle

- Pull the syringe and needle out at the same angle it was inserted
- Hold firm pressure over the injection site for 10-20 seconds to prevent bruising
- Dispose of the needle in a sharps container

Step 7: Attaining an erection

- Your penis should become erect within 5-20 minutes. If your erection dose not reach the desired firmness, do NOT inject more medication. You may increase the dose as directed by your provider with the next use.
- You may use your erection for sexual activity or for the purposes of penile rehabilitation.
 - Note your erection may or may not subside following orgasm

Starting Erectile Dysfunction recovery...

- Your provider may perform an in-office trial to establish your starting dose. You will receive instructions on how to adjust the dosage to achieve the desired effect. DO NOT adjust your dosage beyond the recommendation.
- Injection therapy takes practice. Perform practice injections before using them for sexual activity
- Penile injections may be performed as often as every 48 hours

When to seek medical attention

- If your erection lasts more than four hours this is considered a medical emergency. Prolonged erections can lead to permanent damage and if not treated in a timely manner you may completely lose your ability to achieve an erection
 - Our providers can assist you with treatment during office hours. Please call prior to visiting the office
 - For treatment after our office hours, please go to the emergency department
- Severe pain or bleeding
 - It is normal to have mild burning during the injection
- Redness, lumps, swelling, scarring or curvature of the penis

VACUUM ERECTION DEVICE (VED) FOR ERECTILE REHABILITATION

Step 1: Apply lubrication

- Inside of the cylinder
- Glans (head) of the penis
- Rim of the cylinder (a thick bead of lubricant)

Step 2: Apply the cylinder

- Put the cylinder over the penis placing the rim firmly against the body to form a seal

Step 3: Create an erection

- Apply vacuum
 - Manual devices: Pump 3x
 - Power devices: Activate the power for three seconds
- Allow the penis to fill with blood for 10 seconds
- Repeat until the penis becomes fully engorged
- Pause for one full minute after creating a full erection

Step 4: End the erection

- Press and hold the pressure release valve

Repeat Steps 3 and 4 creating multiple quality erections during a 10-15 minute session.

VACUUM ERECTION DEVICE (VED) FOR INTERCOURSE

Step 1: Load the constriction ring

- Stretch the constriction ring around the cylinder
- Position the ring about ½ inch from the base of your penis

Step 2: Apply lubrication

- Inside of the cylinder
- Glans (head) of the penis
- Rim of the cylinder (a thick bead of lubricant)

Step 3: Apply the cylinder against your body

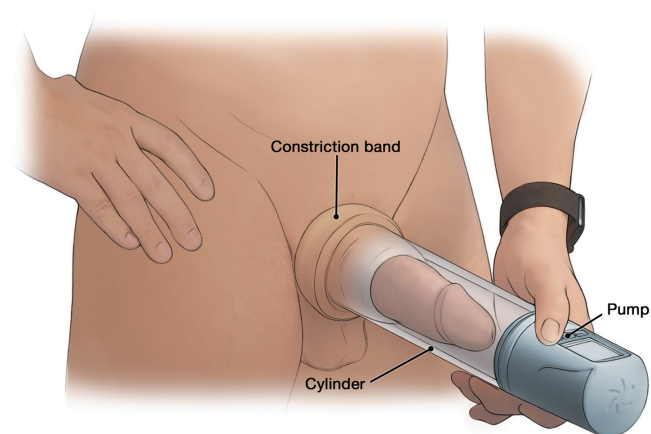
- Put the cylinder over the penis placing the rim firmly against the body to form a seal

Step 4: Create an erection

- Apply vacuum
 - Manual devices: Pump three times
 - Power devices: Activate the power for three seconds
- For 10 seconds allow the penis to fill with blood.
- Repeat until the penis becomes fully engorged

Step 5: Apply constriction ring onto the base of your penis

- Using your thumb and index finger push the constriction ring from the vacuum erection device cylinder onto the base of the penis



Step 6: Removing the device

- Press and hold the pressure release valve to remove the cylinder from your penis.
- You are now ready to engage in sexual activity

Step 7: Terminating the erection

- Using both hands stretch the constriction ring for 10 seconds to allow blood to drain from the penis.
- Once the penis has become more flaccid stretch the constriction ring and remove

The constriction ring must be removed within 30 minutes of application to prevent permanent injury.