

Peyronie's Disease

Peyronie's Disease.... or to the Ordinary Man on the Street Wonky Willy

Despite the humour of the layman's term for PD this is not a funny disease.

Not heard of it?

There are men suffering and they just aren't telling you about it.

Talk about stuff and it demystifies it!
Just as we are doing at Adore Your Pelvic Floor about Women's Pelvic Health.

We may predominately work with women, but it was through a client talking to me about her pelvic health that she then asked about her husband's Peyronie's.

She mentioned he was depressed and they no longer had a sexual relationship, and in fact, all the family were suffering due to the emotional strain of this condition.

Taking into consideration that one man dies every minute of suicide in the world and 50% of men with PD have clinical depression, this is a subject to be talked about openly to enable help for those men and their families.

I also recall a friend talking about her boyfriend's penis when we were in our 20's being bent severely to one side. It was painful to have sex and the relationship ended. Relationships are ending because of this condition; they need not!

I began to look into this condition and thanks to Myra Robson mentioning in the <u>Pelvic Roar Facebook Group</u> - <u>The Women's Health Podcast</u>, I was able to listen to podcasts and read some papers on the Peyronies.

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What is Peyronies Disease?

- It is a bent penis; it can present in one direction or two or like a vase
- 40% of presentations are caused from trauma, coital injury, post radical Prostatectomy, or genetics
- In 30% of presentations there is no obvious cause
- It is a build-up of plaque in the tissue of the penis that can cause a bend, or lump
- Some lead to calcification
- It can cause pain and bruising in the acute stage, pain reducing in the chronic stage
- An unusual appearance in the structure of the penis
- Reduction in length or atrophy, any dysfunction of the penis
- Some sufferers do have a genetic aspect to this disease Dupuytren's contracture and plantar fasciitis

I was amazed to hear a physio use the term "Use it or lose it" Where have some of us heard that before?

Did you know that penis length is one of the most googled topics?

The loss of length is due to the reduced blood flow within the penis.

Men are worried about length and not saying anything; yet 80% of women interviewed said that length did not matter to them.

Peyronie's and Prostatectomy

There is a lot of evidence of peyronie's after a radical prostatectomy.

When men are first diagnosed, (average age of surgery 62 -63) there is only 4% chance post the age of 60 on getting sexual function back.

Initially, most men just want to focus on living, they are told that they will have to regain bladder function and may not regain sexual function. At the time of living or dying the sexual function does not seem important.

However, post surgery and return of continence, sexual function is generally wanted.

After surgery 1 in 6 will experience peyronie's if penile rehabilitation isn't started from day one. Often a man can not tell they have peyronie's until they have an erection again. Due to the nerve damage post prostatectomy, it can take 2yrs for the nerves to recover so the true nature of the effect of the surgery is slow to show; so, assuming and undertaking rehab is vital.

Pelvic Floor exercises are part of that rehabilitation, firstly to regain continence as the prostate supports the bladder in continence. The pelvic floor is to take over the role of the prostate and it does very successfully. Before the need to use the pelvic floor for this role, most men have no idea they actually have one.

As we all know, a lot of women do not know the amazing functional help the Pelvic Floor gives us in continence.

Cardiovascular health

The International Society of sexual medicine announced last year that all men should be screened with regard to their sexual function as sexual dysfunction is an indicator for a heart attack. This is a statement that really blew my mind!

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Included in this, is the lack of nocturnal erections, (these do get less with age, 6-9 a night is common) or if a penis that does not get fully hard (diabetes can cause this too) but whatever, this should be reported to their GP and if the GP knows nothing about it take evidence of this with you. Rather like women have to do when requesting HRT.

Treatment

Thankfully there are very successful treatments and a combination of multi model approaches will help men. The sooner that a man seeks help the better are his chances of a recovery. Especially younger men.

These include Physio lead rehabilitation exercises, via Men's Pelvic Health Specialists.

Neoman on YouTube has credible videos to watch and understand more.

Ultrasound and Shockwave therapy - Men have reported it as a pins and needles sensation when undertaking Shockwave therapy; intensive at first and reducing the amount of rehab over 4 weeks. The process of the Shockwave therapy is measured by Doppler scans.

There are pumps to help with erections and of course various blue pills (Viagra and other similar drugs).

Surgery is the last resort. The penis length will be reduced with surgery and this has reduced already due to the atrophy, this is to be considered.

Losing weight can help get some length of the penis back for every 15kg of weight lost 1cm of penis length returns!

There are interesting facts about the role of the pudendal nerve and hypotonic men's pelvic, Maigne's syndrome and bike seats! (get your male friends to use a prostate relief seat) I feel that maybe for another day.

So, this is my over view of Peyronie's Disease for my fellow Coaches. If you are interested there are many articles available. Google Joanne Milios and follow her <u>podcast The Penis Project</u>. Australia is leaping forward with Pelvic Health and to be watched closely

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