



Men's Pelvic Health Physiotherapy

Specialist assessment and rehabilitation for bladder, bowel, pelvic pain and sexual health concerns

This service provides highly specialised men's pelvic health physiotherapy, including advanced expertise in sexual rehabilitation. Assessment and treatment are tailored to the individual and may involve symptoms affecting bladder, bowel, pelvic floor, pelvic pain, recovery after surgery, and sexual function.

What is men's pelvic health physiotherapy?

Men's pelvic health physiotherapy is a specialist area of physiotherapy focused on problems involving the pelvic floor, bladder, bowel, pelvis and sexual function.

It is different from traditional musculoskeletal physiotherapy. A consultation often includes detailed discussion about bladder, bowel and sexual health, as well as symptoms such as pain, urgency, leakage, constipation, erectile difficulties or recovery after prostate or colorectal treatment.

Care is always led by your goals, symptoms and comfort level. You are never expected to discuss or proceed with anything without explanation, consent and clinical relevance.

What to expect during your consultation

It is normal to feel unsure about what a pelvic health appointment involves. The first session usually begins with a detailed conversation about your symptoms, general health, medical and surgical history, medications, activity levels and, where relevant, sexual health.

You will also be asked about bladder and bowel habits, pain, previous treatment, goals and how your symptoms affect daily life, relationships, exercise and confidence.

Only information that is relevant to your care is discussed, and you can choose not to answer a question or pause the assessment at any time.

Possible examination components

Depending on your symptoms, an examination may include assessment of breathing, posture, abdominal wall, hip or pelvic movement, lower back function, scar mobility and pelvic floor function.

For some men, an internal rectal examination and/or external genital examination may be clinically appropriate to assess pelvic floor muscle tone, strength, coordination, pain, sensitivity, scarring and awareness of these muscles.

This is always explained in advance and only carried out with your full consent. You may decline, postpone or withdraw consent at any stage. Gloves and examination gel are used, and your dignity and privacy are protected throughout.

Technology that may be used

Point-of-care ultrasound (POCUS) may be used to help assess pelvic floor movement, bladder function or abdominal wall function. This is used as a rehabilitation and assessment aid and is not a diagnostic imaging service.

MAPLe assessment may also be considered in selected cases to provide more detailed information about pelvic floor muscle activity and to guide rehabilitation.

Conditions commonly treated

Pelvic, bladder and bowel concerns	Sexual health and surgical rehabilitation
<ul style="list-style-type: none">• Chronic pelvic pain	<ul style="list-style-type: none">• Erectile dysfunction
<ul style="list-style-type: none">• Pelvic floor dysfunction, including overactivity, poor coordination or weakness	<ul style="list-style-type: none">• Painful erection or painful ejaculation
<ul style="list-style-type: none">• Bladder urgency, frequency and overactive bladder symptoms	<ul style="list-style-type: none">• Premature ejaculation
<ul style="list-style-type: none">• Urinary leakage or incontinence	<ul style="list-style-type: none">• Hard flaccid syndrome
<ul style="list-style-type: none">• Post-micturition dribble	<ul style="list-style-type: none">• Peyronie's disease support and rehabilitation as appropriate within physiotherapy scope
<ul style="list-style-type: none">• Constipation and obstructed defecation	<ul style="list-style-type: none">• Pre- and post-prostate surgery rehabilitation
<ul style="list-style-type: none">• Bowel leakage / faecal incontinence	<ul style="list-style-type: none">• Rehabilitation after colorectal cancer treatment or pelvic surgery
<ul style="list-style-type: none">• Pelvic pain related to bowel, bladder or pelvic floor dysfunction	<ul style="list-style-type: none">• Sexual rehabilitation after surgery, cancer treatment, pain or pelvic floor dysfunction
<ul style="list-style-type: none">• Persistent symptoms associated with prostatitis / chronic pelvic pain syndrome	

Treatment options that may be used

Not every treatment is appropriate or necessary for every patient. Your treatment plan is individualised and based on your symptoms, examination findings, goals, preferences and medical history. Some options may be recommended, while others may not be indicated at all.

Education, rehabilitation and self-management

- Advice and education
- Pelvic floor muscle training, relaxation or down-training
- Bladder retraining and urgency management

- Bowel routine advice and toileting techniques
- Individualised rehabilitation programme
- Graded exposure and return to activity / exercise
- Sexual education, including advice on lubrication, positions, pacing and symptom management
- Intimacy and sexual rehabilitation support

Hands-on, device-based and specialised therapies

- Biofeedback
- POCUS-guided rehabilitation (non-diagnostic)
- MAPLe assessment and treatment where appropriate
- Neuromuscular electrical stimulation (NMES) in selected cases
- Transcutaneous tibial nerve stimulation (TTNS) for overactive bladder symptoms where appropriate
- Myofascial release and soft tissue techniques
- Scar mobilisation
- Perineal massage where clinically appropriate
- Visceral mobilisation techniques where appropriate
- Balloon catheter biofeedback for bowel dysfunction in selected cases
- Shockwave therapy where indicated and within scope of practice

Sexual rehabilitation and adjuncts that may be discussed

- Dilator therapy or wand therapy
- Education regarding vibrators or other rehabilitation devices where clinically appropriate
- Use of penile rehabilitation aids such as vacuum pumps or constriction rings where appropriate
- Advice regarding masturbation devices as part of sexual rehabilitation when relevant
- Liaison with your consultant or wider healthcare team to support best outcomes
- Referral onwards for other appropriate medical or allied health input when needed

A note on comfort, consent and specialist care

Men's pelvic health symptoms can feel difficult to talk about, but they are common and treatable. A specialist consultation aims to give you clear answers, a thorough assessment and a practical rehabilitation plan.

Your care is collaborative. You will be fully informed about any proposed assessment or treatment, and consent is central at every stage.

The goal is to reduce symptoms, improve function and help you return to the best possible quality of life.