

**FIVE THINGS MEN AND  
WOMEN DON'T KNOW  
ABOUT INCONTINENCE,  
BLADDER AND BOWEL  
LEAKAGE, CONSTIPATION,  
PELVIC PAIN AND SEX...**

**...AND WHY YOU SHOULD NOT  
BE EMBARRASSED TO ASK!**

**SPECIALIST IN PELVIC FLOOR PHYSICAL THERAPY  
DR. MELISSA HARKNESS**

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By DR. MELISSA HARKNESS  
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## About the Author

### Dr. Melissa Harkness

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#### *Pelvic Floor Therapy Expert*



Dr. Melissa Harkness is an advanced practice physical therapist with special expertise in the treatment of pelvic floor issues, including bowel and bladder incontinence, leakage, constipation, pelvic pain and sexual dysfunction.

Dr. Harkness is one of only a few physical therapists in Lee County who practices both internal and external pelvic rehabilitation using biofeedback, manual therapy and massage, therapeutic exercise, neuromuscular re-education, electrical stimulation and patient education in the treatment of pelvic pain as well as urinary, bowel and sexual dysfunctions.

Each and every week, Dr. Harkness sees many patients who are all suffering from the same types of “embarrassing” pelvic problems – and she has successfully helped those patients get back to living their lives to the fullest – without the aid of drugs or invasive surgeries. Using tried and true methods for strengthening or relaxing the muscles of the pelvic floor as necessary for each individual’s unique condition, Dr. Harkness has helped both men and women return to more satisfying sex lives, more enjoyable social events and more frequent visits with cherished families and friends. Along the treatment journey, Dr. Harkness celebrates every triumph big and small right along with her patients – even just a quick trip to a supermarket or convenience store without absorbent padding.

In addition to private practice, Dr. Harkness is partner and owner of Allied Physical Therapy in Cape Coral, Florida. She and her husband Dr. Matthew Harkness are the proud parents of four beautiful children.

## **HEALTH ADVICE DISCLAIMER**

The information provided in this report is intended for your general knowledge only and is not a substitute for professional medical advice or treatment for specific medical conditions. You should not use this information to diagnose or treat a health problem or disease without consulting with a qualified healthcare provider. Please consult your healthcare provider with any questions or concerns you may have regarding your condition.

It is impossible to give a 100% complete accurate diagnosis and prognosis without a thorough physical examination. Likewise, the advice given for management of an injury cannot be deemed fully accurate in the absence of this examination from one of the Physical Therapy Specialists.

Significant injury risk is possible if you do not follow due diligence and seek suitable professional advice about your injury. Melissa Harkness shall not be held liable for injury or death occurring from following any of the advice in this report.

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## Introduction

Bowel and bladder incontinence, sexual dysfunction, and pain in the pelvic region are difficult subjects to talk about. It can be embarrassing, overwhelming, and come with a lot of uncertainties. No one seems to think anyone else could possibly be having the same issues. However, these are very common challenges faced by men and women of all ages. They are not normal even with aging, and there are methods to improve and eliminate these issues!

I have seen hundreds of patients throughout my training and career as a physical therapist specializing in pelvic floor dysfunction to understand the embarrassment many people feel in seeking treatment. Sometimes, just the thought of talking about it – even with an expert clinician such as myself – is enough to keep many patients mired in an ongoing cycle of pain, incontinence, leakage, constipation and sexual problems.

I am writing this report with a sincere hope that any reader will come away with a clear understanding that they are NOT alone! Roughly half of all women who have given birth and nearly as many men will suffer from some form of pelvic disorder during their lifetime. And nearly as many as that will not seek help for their “embarrassing” problems, instead throwing money at temporary fixes such as absorbent pads, or living their lives in isolation, or worse yet – waiting until symptoms are so bad that a doctor will recommend surgical intervention.

It doesn't have to be this way!

In many cases, these “embarrassing” problems can be successfully treated with a specialized form of physical therapy called pelvic floor therapy. The pelvic floor is the group of muscles at the bottom of the pelvis that supports the bladder, rectum and sexual organs in both men and women.

These muscles can become weakened or tight due to childbirth, prolonged labor, heavy lifting, constant straining during bowel movements, trauma or even surgeries such as hysterectomy or prostate removal. When this happens, pelvic dysfunction can result, leading to symptoms many years later such as incontinence, leakage, pain, internal organs protruding outside the body (prolapse) and sexual problems.

It's a lot more common than you think and it's a lot more easily treated than you think – in most cases without surgery and drugs.

Of course, the best treatment in the world is prevention – and we can help in this area too. Individuals who are scheduled for pelvic surgery can prepare their bodies and muscles for the procedure by consulting with a specialty trained physical therapist who will develop a plan to prepare you physically for your procedure.

And how about childbirth? Few physical events require as much physical stamina as giving birth, and yet, so many women find their bodies to be woefully unprepared for the demand. We can help you prepare your body for the blessed event by teaching you exercises and muscle relaxation methods that will help you bring your little one into the world without excess pain, stress and injury.

In this report you will find some common causes and symptoms of pelvic floor dysfunction – along with a few tips for coping with mild problems. I hope that if you find your own problems described here, you will seek out the professional advice of a specialty trained physical therapist who can help put your mind at ease, assure you that you are not alone, and help steer you toward the path to recovery – and a more fulfilling life, without drugs, surgery, worry or embarrassment.

I provide this report free of charge in an effort to inform those suffering from pelvic pain, incontinence, leakage, and sexual dysfunction that they are not alone and to dispel any reservations you may have about seeking help. It does not have to be this way!

If you still have questions after reading this report, I invite you to email me directly and securely at [Melissa@alliedpt.com](mailto:Melissa@alliedpt.com). No other eyes ever read my email and you can be assured of a prompt, courteous and personal reply.

*1. See full disclaimer on page v*

# FIVE THINGS MEN and WOMEN DON'T KNOW ABOUT INCONTINENCE, LEAKAGE, CONSTIPATION, PELVIC PAIN and SEX...

## ...AND WHY YOU SHOULD NOT BE EMBARRASSED TO ASK!

### 1 Did You Know?

#### **Most hysterectomies are simply not needed**

Many women who have had hysterectomies have done so on the advice of a physician after complaining of heavy bleeding, painful cramps, or other uncomfortable or inconvenient symptoms. And many surgeons, trained to treat the problem with surgery, don't think to advise their patients on the drawbacks of hysterectomy, including an increased risk of incontinence and pelvic organ prolapse later in life (and sometimes even earlier). As far as surgeons are concerned, the surgery is successful when the problem (i.e. heavy bleeding) is solved.



However, the detrimental effects of removing a pelvic organ can be worse than the symptoms that prompted its removal in the first place. Think of it as removing one wall from a structure and leaving the other three walls intact, supporting the roof.



Eventually, one corner of that roof is going to start sagging down because its supporting foundation is gone.

The prevalence of pelvic floor dysfunction is evident every day in television commercials touting lawsuits and legal actions against the manufacturers of surgical and vaginal mesh, which is utilized as a sling to prop up prolapsing pelvic organs. In theory, this lifting of the bladder and other pelvic organs should lessen the symptoms of pelvic floor dysfunction, such as incontinence. However, symptoms usually return quickly because the underlying cause in the pelvic floor muscles has not been addressed.

Of course, there are many reasons why a hysterectomy would be an appropriate treatment – such as in the case of cancer, or if severe, uncontrollable bleeding is causing a persistent state of anemia.

In both cases, pelvic organ prolapses, or urinary or fecal incontinence, or pelvic pain, can be treated – not with additional surgery or drugs, but with physical therapy targeting the pelvic floor

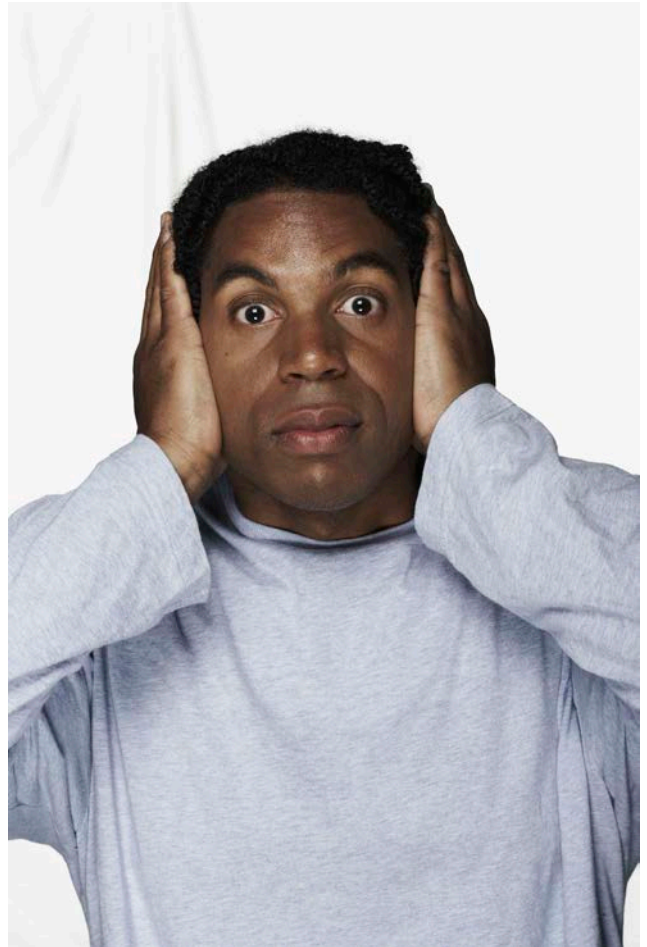
## 2 Did You Know?

### **Pelvic floor dysfunction affects both men and women**

Men can suffer the effects of pelvic floor dysfunction almost as often as women – although the causes differ, of course. Men are more likely to experience bladder and sex-related difficulties due to pelvic floor dysfunction caused by a lifetime of straining during bowel movements, heavy lifting, or prostate issues and surgery.

When male pelvic floor muscles become excessively weakened or tightened, symptoms can range from urinary incontinence or retention to sexual dysfunction. Men may experience an overwhelming urge to urinate, only to experience a tiny trickle at the toilet. Or, there may be leaking without any urge to visit the rest room.

Men can also experience pain during sex, or be unable to achieve or maintain an erection, or achieve climax. This does not mean your sex life is over! Nor does it mean you should consult your doctor for a ticket to a little blue pill. There are treatments that have proven to be very effective in either strengthening or relaxing the pelvic floor muscles as necessary to avoid embarrassing leakage or overwhelming urges to “go,” when the bladder isn’t full. And these treatments and therapy plans can help you return to a more satisfying sex life without drugs!



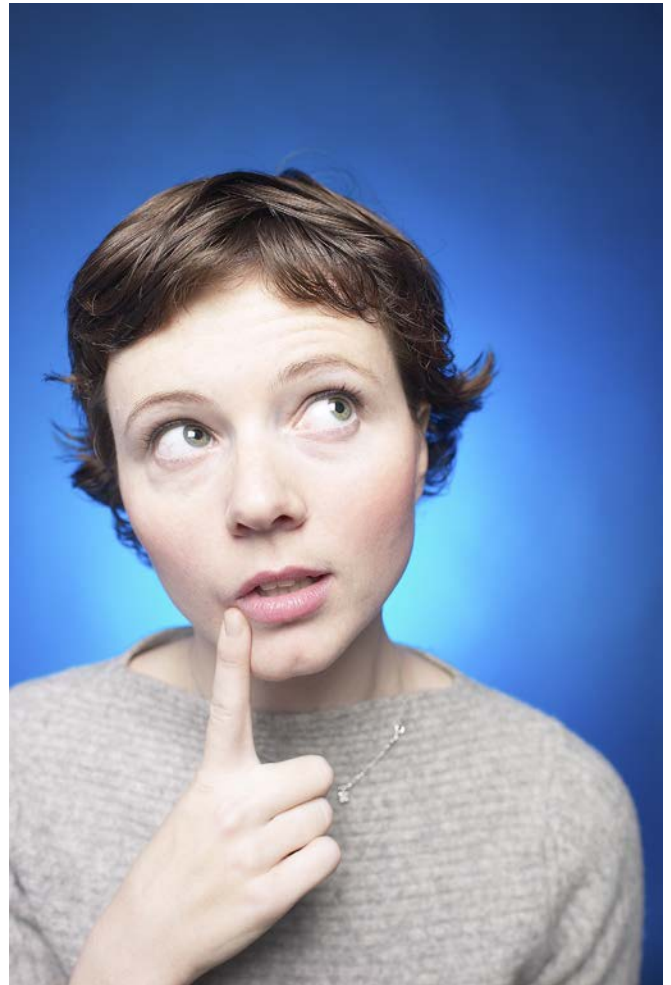
### 3 Did You Know?

#### **You should resist “just in case” visits to the restroom**

How many times have you visited the bathroom before leaving work, leaving to go shopping, leaving for an appointment, leaving a restaurant? We’ve all done it. And we’re all setting ourselves up for pelvic floor difficulties down the road. Who knew?

What happens is that you’re teaching your bladder to empty before it is full – and your brain starts sending signals that you have to go before your bladder is actually full. Most people need to urinate between six and eight times each day – perhaps more if they’re drinking more. But anything more than that is a problem. And getting up three or four times in the night is not normal – it a problem.

The good news is that it is possible with therapy to retrain your brain to send the signal that it’s time to visit the nearest restroom only when your bladder is full – just like you can, with proper training, “teach” your heart to beat slower. Put your bladder on a schedule!



## 4 Did You Know?

### **Kegel exercises may be doing you more harm than good**

Contrary to popular opinion, Kegel exercises – whereby the muscles of the pelvic floor are contracted and released repeatedly in an effort to improve sexual function and stem incontinence – are not always the answer.

In cases where the pelvic floor muscles are already tight, due to excessive exercising, or surgery scarring, or injury during childbirth, Kegel exercises improperly performed, or performed too often, or to treat the wrong condition can exacerbate the problem, leading to difficulty in urination, difficulty with moving your bowels and sexual dysfunction, among other problems.

Of course, there are times that an individual's unique situation may call for Kegel exercise therapy. However, it is important in those situations to consult a physical therapist specialty trained in pelvic floor therapy for instruction on how to execute the exercise properly, and for how long.

## 5 Did You Know?

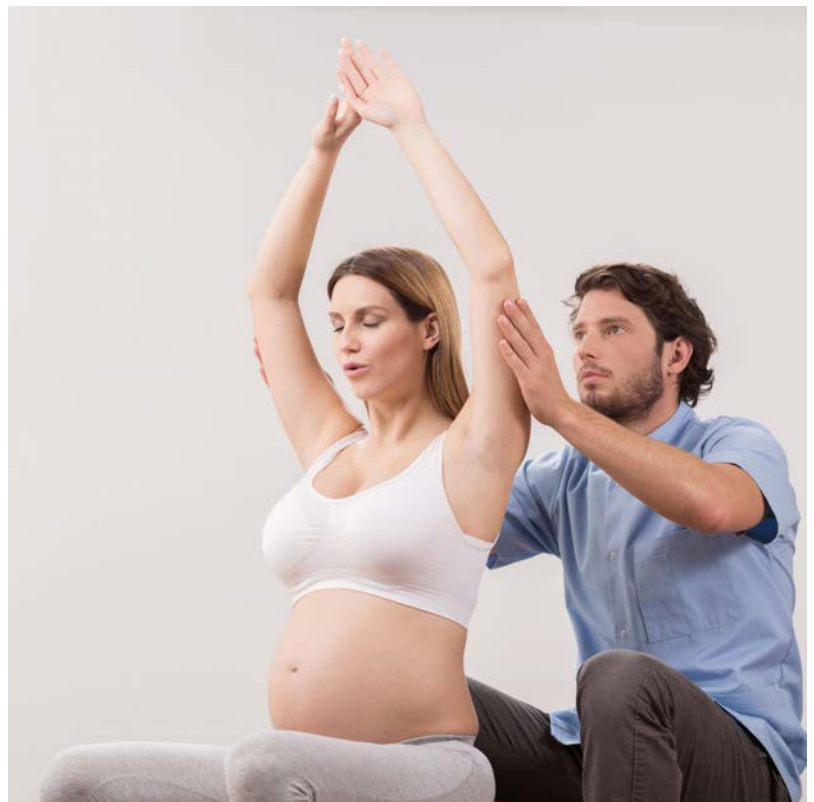
### **You can get physical therapy to help prepare your body for surgery and childbirth**

Although physical therapy is often thought of as an “after the fact” treatment for injuries, the truth is, if more people consulted with a physical therapist for treatment before a surgery or giving birth, there would be less need to see a physical therapist after.

For any surgery, it is always a good idea to prepare the body so that it is better able to handle the physical demands of an invasive surgery. And we would be hard-pressed to think of anything more physically demanding than childbirth. Yet, pregnant women are rarely told of the benefits of physical therapy before giving birth – or even before they become pregnant.

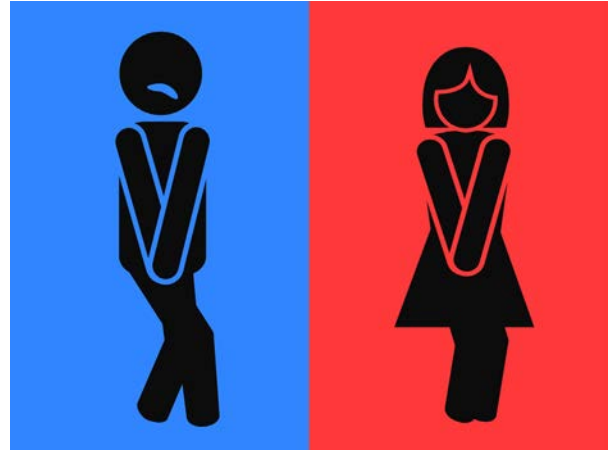
For any kind of surgery, strengthening the muscles can facilitate a more rapid recovery, lessening post-surgical pain, and decreasing the need for mind-numbing pain medications.

In childbirth, pre-labor physical therapy can lead to a more rapid, less painful delivery, with less chance of surgical intervention (episiotomy) and other complications.



## Things to try

If you are experiencing mild symptoms of pelvic floor dysfunction such as sporadic episodes of incontinence, rectal leakage, urinary retention, constipation, sexual and erectile dysfunction, or lower abdominal pain, there are a few things you can try to achieve some measure of relief. And there are also a few things you may want to stop doing that may be contributing to your overall pelvic floor difficulties.



For urinary and bowel incontinence, urinary retention and constipation:

- Any continuously occurring dribbles, spurts, smears or drops are considered to be episodes of incontinence.
- Any repeating involuntary passing of gas (with the exception of the occasional slip) is not normal.
- Continuously straining during a bowel movement for more than a few minutes, without relief, is a problem.
- Feeling a sudden urgent need to urinate and only passing a few drops is a situation that needs to be addressed.

Although it is best to seek the private, educated counsel of a specialty trained physical therapist who is an expert in pelvic floor dysfunction, there are a few things you can try before making that telephone call if you are only having extremely mild symptoms. Just remember, the quicker you make an appointment to be examined, the quicker you can get back to doing what you love, without fear of embarrassing leaks, or sitting in discomfort because there is not a comfortable position to be found.

The first thing to look at is water intake and lifestyle, which are the hardest things to change – but also the easiest, in a non-invasive, non-surgical, non-pharmaceutical kind of way.

**Water Intake:** Experts recommend drinking a half-ounce of water for every pound of your body weight every day. That means a 120 lb. person should consume no less than 60 ounces of water every day. It may sound like a lot, but it's quite necessary for proper hydration and can go a long way in strengthening the bladder and pelvic floor muscles, generally improving a person's health in every way. However, you should not attempt to make a radical switch to increased water consumption without medical supervision.



**Dietary Limits:** Individuals with pelvic floor dysfunction are generally advised to limit their intake of acidic, carbonated and caffeinated beverages, as well as spicy foods and sugar, which can exacerbate bladder and bowel symptoms such as leakage and constipation. Patients are also generally advised to add more soluble fiber to their diets and to stick to consistent meal times. Those who experience problems with escaping gas may want to limit gas-producing foods such as broccoli, beans, Brussel sprouts and other trigger foods.

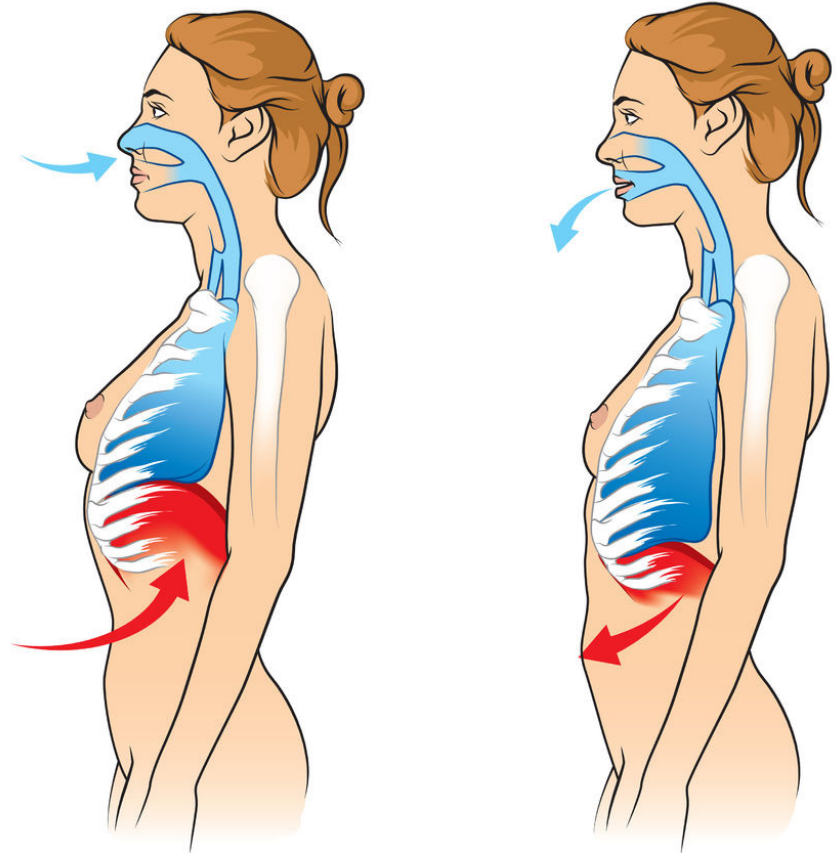


**Pelvic Pain and Pressure:** Pain in the pelvic area – between the hip bones and below the belly button – can usually be attributed to muscle tension due to overuse, straining, lifting, or surgical scarring. These patients are generally advised to avoid activities that put pressure on the pelvic floor muscles, such as heavy lifting, straining during bowel movements, prolonged bending for more than a few minutes, and holding your breath while exercising.



**Proper breathing**

**technique**, especially during exercise, is very important for proper pelvic floor function, which works in conjunction with the diaphragm like a piston, drawing and expelling air from the body. When you hold your breath, you're putting undue pressure on the pelvic floor, which can lead to muscle tension and weakness. When you are experiencing mild pain, a heating pad or ice pack (used outside the body only!) may provide some temporary relief by loosening or numbing tense muscles. Patients who experience mild pain while sitting may wish to try an inflatable ring for some temporary relief.

**Deep breath**

Breath in

Breath out

**Pain During Sex:** Pain during sex for both men and women can often be attributed to muscle tension, lack of fluids, or surgical scar tissue. The first thing to try here is some deep breathing exercises to relax those muscles. And stay away from Kegel exercises which are bound to worsen symptoms! With therapy, you can learn stretching and positioning techniques that will maximize enjoyment



## Conclusion

Pelvic floor dysfunction and the symptoms it causes can be an expensive, frustrating and sometimes embarrassing experience for all patients. No one enjoys wearing absorbent padding or declining social invitations because they fear an embarrassing leak. No one enjoys the discomfort that comes with pelvic pain, or the alarm upon seeing pelvic organs actually escaping the body. Everyone would enjoy a more fulfilling sex life with the person they love.

We hope that you have realized, in reading this special report, that you are not alone! There are many others who are experiencing the very same symptoms as you. And it could be your closest friend, a family member, or the business associate you just met. Of course, you will never know, because people just don't talk about these things. But we do!

And although we understand your apprehension in seeking treatment for what can be viewed as an embarrassing problem “down there” – we urge you to try to put your fears aside, because we CAN help you – without surgical or pharmaceutical intervention! We understand your fears and wish to assure you that this is what we do – all day, every day. There is nothing you can say to shock us – no problem we haven't seen before. At all times we will do what we can to lessen your discomfort while maintaining respect for your body. To learn more about what to expect during pelvic floor therapy, see the video I have prepared here:

[www.alliedpt.com/pelvicfloor](http://www.alliedpt.com/pelvicfloor)

Although I have offered several tips for coping with the symptoms of pelvic floor dysfunction, I hope that you will seek out treatment if your symptoms worsen – or if you have already tried these remedies without relief. As your local area expert in pelvic floor dysfunction and therapy, I hope to become your trusted guide in managing and overcoming your embarrassing symptoms so you can get back to doing everything you love – without fear!

Dedicated to Your Health,

Dr. Melissa Harkness  
Specialty Trained Pelvic Floor Therapist

# FIVE THINGS MEN and WOMEN DON'T KNOW ABOUT INCONTINENCE, LEAKAGE, CONSTIPATION, PELVIC PAIN and SEX...

## ...AND WHY YOU SHOULD NOT BE EMBARRASSED TO ASK!

### Real Patients, Real Results



“Everyone there was friendly and helpful. Melissa Harkness is a highly skilled and compassionate therapist. I followed her suggestions and my problem has really improved..”

*~ L., Cape Coral, Florida*

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“After almost two years of pain and discomfort with pelvic floor dysfunction, my surgeon suggested that I try Allied. I was skeptical but decided to give it a try. I am so glad I did. It has made such a difference. The pelvic floor specialists are kind, caring and experts in their fields. I have made tremendous improvement. I drive almost two hours each way to come for my appointments, it is worth it. My only regret is that I didn't know about the clinic almost two years ago. Don't continue to suffer with pelvic floor dysfunction, give Allied a call.”

*~ Jim M., Lake Placid, Florida*

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“Allied Physical Therapy is an absolute gift for any woman suffering with pelvic pain issues. Melissa Harkness is a true professional who is compassionate, empathetic, well-educated, extremely diligent, a miracle-worker of a physical therapist I have ever known. She answers every question and always makes sure I am comfortable with her therapy method before proceeding.

*~ Carol G., Fort Myers, Florida*