

Your prostate: A priority for life

***A direct report to help every man
understand the facts and realities
of prostate problems***



Stop wondering what's normal, when to see your doctor and what the future holds...

Read on for a no-nonsense guide to the definitions, symptoms, diagnoses & treatment options of prostate problems and take control of your health and your life

Ray Collins

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Introduction

Worryingly, two thirds of British men don't have a clue what their prostate gland actually does. If you're not in the know, you won't be aware of the problems that 35,000 men in the UK face every year and most importantly, you won't be able to spot the early warning signs if something goes wrong with your prostate.

Remember, prostate problems needn't mean cancer – there are other common conditions which are treatable and manageable. That's why it's crucial to know your body and spot the signs when something's not quite right.

We blokes are infamous for shying away from seeing a doctor. It's bad enough going in for a repeat prescription, let alone when there's something wrong 'down there'.

That's why I'm writing this report – to give you the facts about prostate problems so you can begin to realise for yourself what's normal and know when you really do need to make that appointment.

Don't be scared – be prepared, that's what I say. Prostate problems are most common with men over 70 although even golden oldies at 50 are advised to start having regular health checks since it's between these ages that we're most at risk from more aggressive conditions.

But who am I to dish out this advice? I'm Ray Collins, a health writer dedicated to informing the nation about the latest health news, trends and solutions.

The garbage they spin us on the news about our health these days is just preposterous and so contradictory that I've taken to researching common health complaints myself and feeding back my findings to people who want straight-talking, no-nonsense advice so they can make up their own minds up and take control of their health and their lives.

This report is just a stepping stone. If you have prostate problems, there are so many resources out there to help you manage, control and remain positive about the future. From support groups to charities, even the good old NHS.

Read on to learn about your prostate – what it is, what it does, how to keep it healthy, what obstacles it could throw up and how to overcome them. It will only take a few minutes and could just save your life...

And remember, if you're at all concerned about your health, please see a medical professional.

Yours,
Ray Collins

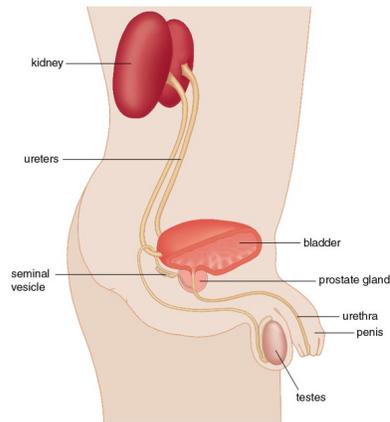


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Be aware, take care ***10 facts every man should know***

1. A simple definition of the prostate gland

The prostate is a walnut-sized gland in the male reproductive system. The role of the prostate is to make seminal fluid, which is mixed with sperm to make semen. Your prostate is positioned just below your bladder



2. What the prostate gland looks like

The prostate is a small gland situated just below the bladder between the root of the penis and the anus

In older men with prostate problems it may swell from the size of a walnut to that of a plum

If the prostate grows too big, urine flow may be weaker

3. How to know if your prostate is healthy

Urine flow is a good indicator of prostate problems. If your once proud stream of urine has dwindled to a feeble trickle, you'll need to see your GP

There are a variety of reasons for a change in the pressure of urine flow that are completely normal and just part of the natural ageing process.

Symptoms to look out for are getting up more at night to urinate, dribbling before or after urinating, and a weak urine flow

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Less common symptoms include pain in the testicles, problems getting an erection, pain when ejaculating, pain when passing urine and blood in the urine or semen (hematospermia)

4. Age isn't always a factor

Prostate problems are usually most common in men over 70 yet there are conditions which can affect men as young as middle-age. Remember, these conditions are common and manageable and aren't always linked to cancer so it's best to get them checked out by a medical professional so you can treat them accordingly

5. PSA tests

If your GP wants to rule out prostate cancer he will probably suggest that you have a PSA test. This is a blood test that measures the level of a protein called Prostate specific antigen (PSA). PSA is produced in the prostate gland and found in small amounts in the blood

A raised PSA level can be a warning sign of the presence of prostate cancer. It can also indicate other problems that aren't cancer - three out of four men with a raised PSA level will not have prostate cancer. However, the higher the PSA level, the greater the likelihood of a cancer being present

Remember though, that although the PSA test is seen as the best current method for screening, it is often not an absolute measure of accuracy so second opinions may be sought

6. The genetic link

Look at your family tree. Has your father, grandfather, uncle or brother had prostate cancer? If this is the case, then you have a greater risk of developing the disease

It's hoped that in the future genetic profiling will be developed in order to identify men with a high risk

Tell your doctor if any family members have had the disease so you can be given regular blood tests to monitor your PSA

7. Healthy eating does reduce the risk

Try to eat six portions of brightly coloured fruit and vegetables a day. Include three portions of oily fish a week, such as salmon, herrings, mackerel or sardines, which are rich in vitamin D and essential fatty acids, omega-3 and omega-6

There is evidence that selenium, a trace mineral, helps lower the risk of prostate cancer by combating cell damage. Selenium is found in broccoli, Brazil nuts, seafood, asparagus, brown rice and onions

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Selenium can also be taken in supplement form and works best when combined with vitamin E and zinc

Mediterranean men have a lower prostate cancer rate and this is believed to be down to a diet rich in fruit and vegetables, garlic, olive oil, fish and tomatoes

Tomatoes contain a bright red pigment called lycopene, a powerful carotenoid antioxidant, which helps to repair damaged cells

8. Maintaining a healthy weight is advised

There is also a clear link between obesity and cancer – putting on those extra cuddly pounds around your waist doubles your risk of dying of cancer

Reduce your fat intake and replace saturated fats with monounsaturated and polyunsaturated fats

Saturated fats are found in found in meat, some margarines, crisps, chips, and many processed foods

Lower salt intake and watch your alcohol intake. Avoid too much cured meat such as smoked dishes, or processed hams, as they may contain carcinogens, a substance that may promote or aggravate cancer

9. Keep hydrated with antioxidants

Japanese and Chinese men have very low levels of prostate cancer and green tea is thought to be one reason why. This is because it's rich in polyphenols, which have antioxidant properties

Alcohol and fizzy drinks are rich in sugar, which can pile on the pounds. Instead, you should try to drink six to eight glasses of water each day to help flush out the kidneys and keep the body hydrated

10. Leading an active lifestyle

Exercise helps to balance hormone levels, prevent obesity and boost the immune system. And it's never too late - studies have shown that exercise is still beneficial for men who have been diagnosed with prostate cancer and are receiving treatment for it

Since the prostate gland plays a role in the sexual response cycle, it's important for it to release seminal fluid (semen) and some medical professionals recommend ejaculation for relieving prostate distress and as a preventative measure for such conditions

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Leaflets, advice from your GP, rumours in the pub...

If you're as confused as I was about prostate problems, read the things you REALLY need to know here

Growing older raises your risk of prostate problems.

The most common 3 prostate problems are:

- 1) Prostatitis
- 2) Benign prostatic hyperplasia
- 3) Prostate cancer

I'll talk through these in more depth shortly, but first, let's look at general changes you should look out for – what's normal and what you should monitor.

Urinary habits

As you get older, you may find you have urinary problems but you don't have to put up with them. If you have a problem in your prostate, your urinary habits may change. This is because your prostate surrounds the tube you pass urine through (your urethra)

For some men, problems with passing urine may be an early warning sign that they have a prostate problem. Most men with early prostate cancer do not have urinary symptoms.

Remember that not all problems with passing urine lead to the prostate. They could be caused by another health problem such as diabetes or by medication you may be taking.

Common symptoms of prostate problems

- Needing to urinate more often, especially at night
- Difficulty starting to pass urine
- Straining or taking a long time to finish urinating
- A weak flow of urine
- A feeling that your bladder has not emptied properly
- Needing to rush to the toilet or dribbling urine

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Less common symptoms of prostate problems

- Pain when passing urine
- Pain when ejaculating
- Problems getting or keeping an erection
- Blood in the urine or semen

If you have any of the symptoms above, you should make an appointment to see your GP.

Now we're going to take a more in-depth look at the 3 most common prostate problems starting with Prostatitis.

Prostatitis

- **What is it?**

Prostatitis is an inflammation or infection of the prostate gland. It does not raise the risk of getting prostate cancer and affects men of all ages.

Chronic Prostatitis is the number-one reason men under the age of 50 visit an urologist. Chronic Prostatitis may also be linked to other urinary tract infections.

There are three types of Prostatitis: **Acute bacterial Prostatitis**, **Chronic Bacterial Prostatitis** and **Chronic Nonbacterial Prostatitis**.

Acute bacterial Prostatitis is a sudden bacterial infection marked by inflammation of the prostate. This is the least common form of Prostatitis but symptoms are usually severe. Symptoms include a fever, chills, nausea and burning when urinating. Left untreated, this condition can lead to low blood pressure and may become fatal. It is usually treated in hospital with intravenous antibiotics, pain relievers and fluids

Chronic bacterial Prostatitis is a result of recurrent urinary tract infections that have entered the prostate gland. It is thought to exist for years in some men before producing symptoms. The symptoms are similar to Acute bacterial Prostatitis but are less severe. It's often difficult to find the bacteria in the urine. Treatment includes antibiotics for 4-12 weeks and treatment for pain

Chronic Nonbacterial Prostatitis is the most common form of Prostatitis accounting for 90% of cases. The condition is marked by urinary and genital pain for at least 3 of the past 6 months. Patients have no bacteria in their urine but may have other signs of inflammation

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- **What causes it?**

It's not entirely clear how the prostate becomes infected. One theory is that the bacteria that causes Prostatitis may get into the prostate from the urethra by backward flow of infected urine or stools from the rectum

In the past, the condition was believed to be a sexually transmitted disease but more recent research suggests that only a small number of cases are passed on through sex

There are certain factors that increase your risk of developing Prostatitis however. These include having recently had a medical instrument (such as a urinary catheter) inserted during a medical procedure, engaging in rectal intercourse, having an abnormal urinary tract, having recently had a bladder infection and having an enlarged prostate

- **What are the symptoms?**

The symptoms of Prostatitis vary – you may have no symptoms whatsoever or symptoms may be so sudden and severe that you need emergency care

When present, symptoms include: frequent urges to urinate, difficulty urinating, pain or burning during urination, chills and fever, pain in the abdomen, groin or back, pain during sex and blood in the urine

- **How is it diagnosed?**

If your doctor suspects that you have Prostatitis or another prostate problem, they may refer you to an urologist (a doctor who specializes in diseases of the urinary tract and the male reproductive system) to confirm the diagnosis

You will then typically undergo a comprehensive exam, including a digital rectal exam. The doctor will be able to evaluate whether the prostate gland is enlarged or tender. Additional tests such as a prostate fluid analysis for signs of infection, transrectal ultrasound, biopsy or voiding studies may also be carried out

- **How is it treated?**

The treatment of Prostatitis varies and is usually individual to which type of Prostatitis you have. It's crucial that the correct diagnosis and treatments are carried out. It's also important to make sure your symptoms are not caused by urethritis (inflammation of the urethra) or some other condition that may lead to permanent bladder or kidney damage

Treatments include: anti-inflammatory medicines with warm baths, antibiotic medicine for infectious Prostatitis, pain medications, muscle relaxants, surgical removal of the infected portions of the prostate, stool softeners and prostate massage

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Most men make a full recovery within 2 weeks

- **How can you prevent it?**

Although sometimes it can't be completely prevented, avoiding spicy foods, caffeinated or acidic drinks and cycling, staying well hydrated, practicing good general and sexual hygiene have been shown to lessen the chance of developing Prostatitis

Benign prostatic hyperplasia (BPH)

- **What is it?**

In many men, the prostate grows with age and as it does, it compresses the urethra tube. The growth in itself is harmless but the problems it presents can be uncomfortable and frustrating

It occurs most often in men over the age of 60. Up to 30% of men in their 70s have BPH which causes them discomfort

- **What causes it?**

The enlargement of the prostate gland compresses the urethra and so obstructs the urine flow

- **What are the symptoms?**

Symptoms of BPH include difficulty when urinating, even when the bladder feels full, a weak or interrupted urinary stream, a feeling that the bladder is not completely empty, increased need to urinate, the need to urinate urgently, dribbling of urine after urination and a burning sensation when urinating

- **How is it diagnosed?**

A doctor can often diagnose BPH by carrying out the following tests: Asking you about your symptoms and filling out a short questionnaire so that they can score the severity of the symptoms, recording your drinking and urination habits over three days, carrying out a rectal examination so they can feel whether the rectum wall is enlarged, taking a urine sample and/or blood test. X-rays including an ultrasound may also be necessary depending on the individual's symptoms

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- **How is it treated?**

Treatment of BPH is only usually necessary if the symptoms are bothersome or complications are present. If there are only minor symptoms, then a monitoring approach may be suitable

Your doctor may prescribe you medication if they diagnose BPH. There are two types of medications for this problem:

- 1) Alpha-blockers: Help to relax muscle fibres within the prostate, reducing the obstruction to the urine flow. They do not reduce the size of the prostate however and side-effects such as dizziness, headaches and drowsiness are common
- 2) 5-alpha-reductase inhibitors such as finasteride (Proscar) – Inhibit the growth of the prostate and decrease the size of the gland. These medicines can take many months to become effective since they rely on physical shrinking

Surgery is also an option for BPH. An operation on the prostate will involve the removal of parts of the enlarged tissue. The most common operation is an endoscopic surgical procedure known as transurethral resection of the prostate (TURP)

Surgery has however been linked to side-effects such as erectile dysfunction (in 14% of men after TURP) and urinary incontinence (5%)

Although the benefits of surgery are long-lasting, because only part of the prostate is removed, further operations may be needed

- **How can you prevent it?**

Although sometimes it can't be completely prevented, eating a low-fat diet with plenty of vegetables especially onions and garlic have been shown to lessen the chance of developing Prostatitis

Clinic trials have also shown that saw palmetto, nettle root and pumpkin seeds effectively reduced symptoms caused by an enlarged prostate

Prostate cancer

- **What is it?**

Prostate cancer is a form of cancer which develops in the prostate gland. Early-stage prostate cancer means that cancer cells are found only in your prostate

Compared with other cancers, prostate cancer grows slowly. This means that it can take 10 to 30 years before a prostate tumour gets big enough to cause symptoms or for your doctor to find it

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Most men who develop prostate cancer will die of something other than the condition itself

Prostate cancer is most common in men aged 65 or over, although younger men can be diagnosed with it as well. By age 80, more than half of all men have some cancer in their prostate

- **What causes it?**

The causes of prostate cancer are largely unknown, and for similarly vague reasons the condition is more common in men of African-Caribbean or African descent and less common in men of Asian descent

Men with a history of prostate cancer in their family are also at a higher risk of developing it and like with all prostate problems, a healthy lifestyle is advised

- **What are the symptoms?**

Men with early prostate cancer are unlikely to have any symptoms, as these only occur when the cancer is large enough to put pressure on the urethra (the tube that drains urine from the bladder)

However, symptoms can mirror BPH – the condition we talked about earlier, so: Difficulty passing urine, passing urine more frequently than usual, pain when passing urine, blood in the urine

Secondary cancer in the bones, lungs, lymph nodes and liver can also occur (when the cancer has spread from the prostate to other areas of the body) which is why it is crucial to catch prostate cancer at an early stage

- **How is it diagnosed?**

Prostate cancer is diagnosed through a series of tests – most commonly a urine test, blood test and digital rectal examination. An MRI scan may also be necessary. Your doctor will refer you to an urologist if further investigation is needed

- **How is it treated?**

Prostate cancer is most often found in early stages. When it is found early, there are a number of treatment choices available

The outlook for prostate cancer is generally good. This is because, unlike other cancers, prostate cancer usually develops very slowly. A man can live for decades without having any symptoms or needing any treatment

Typical treatments include removing the prostate, hormone therapy and radiotherapy

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If the cancer spreads from the prostate to other parts of the body (metastasis), typically the bones, it cannot be cured and treatment is focused on prolonging life and relieving symptoms. Approximately 10,000 men die from prostate cancer in the UK each year

All treatment options carry the risk of side effects including: Loss of libido, inability to obtain or maintain an erection and urinary incontinence. For this reason, many men choose to delay treatment until there is a significant risk that the cancer might spread

Remember – there are a lot of treatment choices, make the one that's right for YOU. Get the opinions of several different doctors and time your time to research your choices and consider your partner too

There are organisations and support groups out there and it IS possible to live a full life after prostate cancer

Treatment choices will depend on many factors and your prostate cancer risk group will be taken into consideration. Doctors use details about your cancer to place you into a low, medium or high-risk group:

Low risk

Prostate cancer is not likely to grow or spread for many years

Medium risk

Prostate cancer is not likely to grow or spread for a few years

High risk

Prostate cancer may grow or spread within a few years

Early stage prostate cancer patients are typically offered the following treatment options. Each come with their own pros and cons so be sure to research them thoroughly before deciding:

Active surveillance

Closely watching for any sign that the cancer may be growing or changing. This is a good option for early-stage patients as it means you can avoid the side effects and costs of treatments without shortening your life

You can change your mind on this treatment and decide to have a different treatment at any time

Surgery

There are different types of surgery available for men with prostate cancer in good health. These include **Open prostatectomy** (removing the prostate through a single cut in the abdomen), **Laparoscopic surgery** (using a laparoscope which is a long slender tube to see and remove the prostate) or

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Perineal prostatectomy (removing the prostate through an incision between your scrotum and anus)

Radiation therapy

Radiation therapy uses high doses of radiation energy to treat cancer. This is the best treatment for older men or men who have other health problems.

Questions to consider

The following questions are common discussions that you may want to think over yourself or talk through with your partner:

1. Which treatment is a good choice for me?
2. What can I expect during the treatment?
3. What are the pros and cons of each treatment?
4. How will this treatment affect our sex life?
5. What about the side effects?
6. Will I be in pain?
7. Will I need further treatments?
8. How long can I expect to live after this treatment?

Talk through the options with your doctor too – ask questions, know your health history and get a 2nd or even 3rd opinion for ultimate peace of mind

• How can you prevent it?

Cut down on meat

Prostate cancer - a hormone-based disease - may be strongly linked to the consumption of meat which contains higher levels of hormone-disrupting chemicals. Try to eat meat no more than three times a week. It's best to eat white meat, and lean cuts of red meat with equal portions of fish. Opt for hormone-free organic cuts where possible

Don't fry food

Diets which are high in dairy products - milk, cheese, butter and saturated animal fats - are also associated with a higher incidence of prostate cancer. Avoid trans-fats, found in margarine, vegetable shortening, and processed vegetable oils. If you are overweight, start a diet to reduce your risk

Eat more fruit

Eat five to nine daily servings of organic fresh fruit and vegetables. Eat plenty of rich red tomato sauces. Try to include soya in your diet - soya milk, tofu or soya yoghurts. These are all high in antioxidants, which protect our cells against the damaging effects of free radicals and can help prevent cancers

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Take vitamins

Recommended daily supplements for prostate protection include: Vitamin A, C, D and; Selenium and Flaxseed oil

Stop smoking

Giving up cigarettes will also protect your zinc levels

Avoid using garden fertilisers and pesticides

Many of these contain hormone-disrupting chemicals

Exercise

Because very little research has been conducted into prostate cancer, the power of exercise, though known to be beneficial in boosting the body's immune system, is still largely uncertain. What scientists do know is that exercise can prevent cancer because it enhances natural immunity by improving circulation, blood pressure and the efficiency and strength of the heart

It also improves the antioxidant defences of our cells, which can help to counter the potentially damaging effects of oxidants, and which can lead to the genetic mutations that lie behind the development of cancers

Can I still have my steak?

Diets that are high in meat, particularly red and processed meats, may increase the risk of prostate cancer. Meat intake has also been associated with high fat intake which may also have cancer-promoting effects.

Diets high in meat may also be low in protective fruits and vegetables. Ruminant meats, such as beef and lamb, are also a source of phytanic acid, which has been linked to an increase in the risk of prostate cancer in the case of dairy produce. Red meat is a major source of zinc which promotes testosterone synthesis.

A number of studies have compared the relationship between the degree of meat cooking and prostate cancer risk. Meat that is 'well done' and 'very well done' is more likely to increase the risk of prostate cancer.

To help prevent and control cancers (including prostate) it is recommended you eat less than 500g (18oz) a week of red meat.

However, meat is part of a valuable food group that provides protein to build and repair body tissues, as well as other essential vitamins and minerals, such as iron.

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There are some other sources of protein such as fish, eggs, soya and pulses, that can substitute for some meat.

What about my sex life?

It is a physical need, like sleeping or eating, or breathing. For a healthy male, regular release of the prostate fluid is **necessary** to maintain good prostate health.

Orgasm (ejaculation) is much like eating. But, just like eating, if you overdo it, you suffer. If you overdo it all the time, you get weak, and sick, and you die young.

It is one of the rhythms of your life. Like your heartbeat, your breathing, your eating, your sleeping... It requires moderation and a regular rhythm for best results. This is something we are not taught as young men. But, it would be a good and important thing to teach.

You function best and most healthfully when: Your heartbeat is calm and regular. Your breathing is deep and even. You sleep long enough each night. You eat the right amount on schedule.

Doesn't it make sense that the same would hold true for your love life?

In a woman, it is easier to see the rhythm – the monthly cycle of ovulation and menstruation.

BPH will not directly affect your sex drive. You may be having other problems with sex, such as difficulty keeping an erection or pain when you ejaculate, which put you off doing it. It's worth talking these issues through with your partner if you're worried about your relationship suffering.

For many **Prostatitis** sufferers, they may experience sexual dysfunction, including ED, premature ejaculation, losing gratification and so on.

However, not all unpleasant sex result from prostatitis. It can be affected by mood, pressure, and so on. But if you don't have any problem with sexual intercourse while having prostatitis, that doesn't indicate that you're always free from dysfunction. The condition is always changing.

Thus, when prostatitis occurs on you, your sexual intercourses would be possibly affected.

How sex affects the prostate gland

As we all know, when a man is having sex, his prostate gland is congestive because of exciting.

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Does this indicate that it is harmful to have sex if you prostatitis?

No.

Prostate fluid is a main ingredient of semen. When a man ejaculates, the prostate fluid expels.

This action helps the prostate gland to "detox". Expelled prostate fluid brings away many waste and toxic materials. After the fluid is expelled, more fluid produces. This is like "washing" the gland.

What prostatitis sufferers need to notice while having sex

- 1** If you're an acute prostatitis sufferer, avoid sex till your treatment ends
- 2** For chronic prostatitis sufferers, don't have too much sexual intercourse it is suggested to control the frequency between 1-3 times per week
- 3** Before and after having sex, wash your perineum area. A hip bath with warm water helps to eliminate the inflammation
- 4** If you feel a pain with ejaculation, restrain from having sex
- 5** Sexual intercourse at each time shouldn't last long. Also the movement shouldn't be intense

Prostate cancer and sex

Treatment for **prostate cancer** can cause a variety of side effects. Any of these can affect your sex life, some more than others.

Some men get diarrhea during radiotherapy and for some time afterwards. This can be unpleasant and tiring and may put you off wanting to have sex. It will gradually go back to normal after a few weeks though.

You may feel too tired to want sex for some time after prostate cancer treatment.

Radiotherapy, surgery and hormone treatment can lead to difficulty getting an erection (impotence).

Erection difficulties can be temporary or permanent and can be very difficult to come to terms with. You may find it difficult to talk about this with your doctor or with your partner.

If you can talk to your doctor or specialist nurse, you may find they have a specialist counsellor or sex therapist you can be referred to.

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Men also have a cycle

The difference is: the time frames in our cycles are much more individual and varied than a woman's.

If you are healthy, you produce a certain amount of sperm and semen in a regular period of time. Some men make a lot rather quickly. Some men take a lot longer to make a full supply.

Once your body has created a full supply of semen and sperm (specific to each individual) it needs to release it. That is when you get aroused. After you ejaculate, your cycle starts again.

The length of that cycle is determined by genetics, age, what you eat, and general health.

If you are healthy and enjoy sex within your own personal natural rhythm, you can enjoy sex long into your 80s and 90s without complications.

When to see your doctor

If you have any of the following symptoms, see a medical professional as soon as possible:

- Frequent urge to urinate
- Blood in urine or semen
- Painful or burning urination
- Difficulty in urinating
- Difficulty in having an erection
- Painful ejaculation
- Frequent pain or stiffness in lower back, hips, or upper thighs
- Inability to urinate, or
- Dribbling of urine

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Information and support groups:

An informative site about prostate problems:

<http://www.prostateproblems.org.uk/>

NHS prostate resources:

<http://www.nhs.uk/Livewell/Prostatehealth/Pages/knowyourprostate.aspx>

Prostate problems in the media:

<http://www.telegraph.co.uk/sponsored/health/mens-health-concerns-tena/8541001/Mens-health-concerns-Prostate-problems.html>

Prostate cancer support association:

<http://www.prostatecancersupport.info/>

The British Prostatitis Support Association

www.bps-assoc.org.uk

The Prostate Cancer Charity

<http://www.prostate-cancer.org.uk/>

Cancer Research UK

<http://www.cancerresearchuk.org/>

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Afterword

If you found this report helpful, chances are you'll have a thirst for other health knowledge so why not join my Good Life Letter readers and get two weekly e-mails packed full of fascinating health tips, news, trends and solutions?

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