CBH MEDICAL REHABILITATION

COMPLETE PROGRAM GUIDE

# PENILE REHABILITATION VACUUM THERAPY & INTIMACY

CHOOSING BETTER HEALTH

THREE COMPLETE PROGRAMS INSIDE THIS GUIDE

**Section 1:** Prostate Cancer — Before, During & After Treatment (Surgery and Radiation)

**Section 2:** Peyronie's Disease — Stretching Protocol & Plaque Reduction

**Section 3:** General & Organic Erectile Dysfunction

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**WHY EVERY ERECTION MATTERS — THREE THINGS HAPPENING AT ONCE**

With every erection you create using the device, three things are happening simultaneously.

- **Blood supply** — Oxygen-rich blood enters the cells of the penis, feeding and maintaining the tissue.
- **Elasticity and length** — The penis stretches like elastic. This is where your length comes from and how it is preserved.
- **Smooth muscle and girth** — The smooth muscle of the corpus cavernosum is being exercised. This maintains and restores girth and erectile strength.

Every session you complete is doing all three simultaneously. This is why consistency matters more than any single session.

# DEVICE FUNDAMENTALS

*Read this section before your first session.*

## BEFORE YOU START — EMPTY YOUR BLADDER

Before every session, empty your bladder completely. When the urge is gone, stay a moment longer and let it finish dripping out. If you are still experiencing leakage, place a small piece of cotton at the opening of the cylinder before inserting the penis. This catches any urine that may enter. Urine will not damage the cylinder but will cause an odor when the device heats up during use.

## CYLINDER SIZING

Your device comes with the standard cylinder. If it feels too large, use the smaller insert that comes in your kit. After 7–10 days of consistent use, try going without the insert — most men find they no longer need it as tissue health improves.

## LUBRICANT — PURPOSE AND APPLICATION

Lubricant creates an airtight vacuum seal between the cylinder rim and your body. Without it, the device cannot build proper suction. Apply in two places before every session:

1. **Around the rim of the cylinder**
   Apply a thin, even line all the way around the top ridge — like applying toothpaste to a toothbrush. This is your vacuum seal.

2. **Inside the cylinder**
   A light coat to help the penis expand smoothly and reduce friction during pumping.

3. **Peyronie's patients only — on the head of the penis**
   Apply lubricant directly to the head of the penis before insertion.

Use the medical-grade lubricant included in your kit, or any water-soluble lubricant. **Never use oil-based lubricants** — they degrade the tension rings over time.

## BODY POSITION

Stand up if you are able. Standing places the penis below the heart, promoting better blood flow downward into the tissue and producing stronger results faster. Seated or lying down are acceptable if needed but may take longer to achieve engorgement.

## SWELLING AT THE BASE

You may notice swelling or puffiness at the base of the penis during or after a session. This is engorgement of the penile tissue — blood pooling at the base before it distributes fully through the shaft. It is common, especially in early sessions. It is not harmful.

> **IF SWELLING AT THE BASE CONCERNS YOU**
>
> Reduce pump pressure slightly on your next session. Allow blood to fully recede between cycles before pumping again. As your tissue becomes more conditioned over the first few weeks, base swelling typically reduces and distributes more evenly. If swelling is painful or persists after the session ends, contact CBH at 947.224.7342.

**AVOIDING FLUID IN THE PUMP**

Fluid — urine or lubricant — can enter the pump motor if not careful. This can damage the motor over time.

- ⚠ Always empty your bladder fully before every session.
- ⚠ Use the cotton tip method if you have leakage issues.
- ⚠ Do not over-apply lubricant inside the cylinder — a light coat is sufficient.
- ⚠ After sessions, store the motor detached from the cylinder, upright, in a dry location.
- ⚠ If fluid enters the motor, allow it to dry completely before next use. Do not use a wet motor.

## WHAT HAPPENS WHEN THE MOTOR STOPS

Your device has a built-in vacuum safety limiter. When the motor stops automatically, it means maximum safe pressure has been reached. This is a safety feature — not a malfunction. Reaching maximum pressure does NOT guarantee a full erection. The blood flow is still occurring in the tissue even when you cannot see a full erection.

**HAND TEST — CONFIRM YOUR DEVICE IS WORKING**

Place the open end of the cylinder flat on your palm. Activate the pump until it stops. Stretch your arm out with your palm facing down. The device should stay attached to your palm from suction alone. If it falls, replace the batteries first — this is the most common cause of reduced pressure.

## THERAPY VS. INTERCOURSE — KNOW THE DIFFERENCE

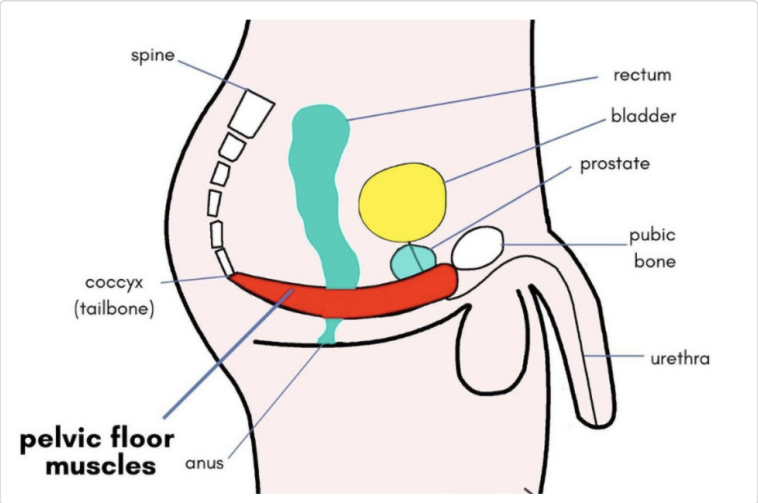
| | |
|---|---|
| THERAPY | **Pump and Cylinder ONLY. No tension ring.** The daily rehabilitation exercise. Goal: cycle oxygenated blood in and out of the penile tissue. Not about producing an erection for sex — it is about tissue health, length preservation, and smooth muscle conditioning. |
| INTIMACY | **Pump and Cylinder to build erection, then tension ring.** Use the device to build a firm erection, slide the tension ring from the cylinder base onto the base of the penis, remove the cylinder, and proceed with intimacy. |

**TENSION RING — 30 MINUTE LIMIT**

Restriction rings must NEVER stay on longer than 30 minutes. Always remove before sleep. To remove: pull the ring handle gently while allowing blood to recede, then slide it off.

## PELVIC FLOOR / KEGEL TRAINING

Do Kegel exercises at the end of every vacuum therapy session — 3 sets of 10 repetitions. To locate your pelvic floor muscles: stop urination midstream, or tighten the muscles that stop you from passing gas. During Kegels, isolate these muscles only — do not tighten buttocks, thighs, or stomach. Breathe throughout.




*The pelvic floor muscles support urinary control and erectile function. Consistent Kegel training strengthens these muscles before and after treatment.*

**THE KEGEL CUE**

Tighten 3 seconds → relax 3 seconds → repeat 10 times → 3 sets. Complete after every device session.

SECTION 1

# PROSTATE CANCER PROGRAM

*Before, During & After Treatment — Surgery and Radiation*

## UNDERSTANDING YOUR SITUATION

Prostate cancer treatment — whether surgery or radiation — disrupts the neurovascular bundles that control erections. These nerves and blood vessels sit within millimeters of the prostate. Even nerve-sparing procedures affect them. Your erections will not work the same way right away. This is expected. It is not permanent for most men. But what you do in the months surrounding your treatment is the single biggest factor in how much and how fast you recover.

More than 80% of men experience ED after prostate cancer treatment and most are never told what to do about it. This program closes that gap.

**THE CORE TRUTH**

Recovery does not happen on its own. It happens because you consistently bring oxygen-rich blood to the penile tissue while the nerves and vessels heal. Every erection you create with the device is simultaneously feeding your cells with oxygen, stretching the elastic tissue to preserve length, and exercising the smooth muscle for girth. That is why consistency is everything.

## PHASE 1 — BEFORE TREATMENT: PREHABILITATION

## WHY PREHABILITATION CHANGES EVERYTHING

Men who begin penile rehabilitation before surgery or radiation recover faster and more completely than men who start after. Preparing your body before disruption occurs means the tissue enters treatment well-conditioned and well-oxygenated. You also learn to use the device correctly before managing post-treatment recovery at the same time.

## PREHABILITATION DAILY ROUTINE

1

**Empty bladder. Stand up. Apply lubricant.**

Rim of cylinder — thin even line all around. Inside cylinder — light coat. Position penis in cylinder against body.

2

**Activate pump — 8–10 repetitions**

"Start the motor. Pull blood into your penis. As soon as you feel discomfort, stop the vacuum. Let your penis stay erect 20–30 seconds. Release it. That's one erection. Get another." — Charles. Repeat for 8–10 reps.

3

**Final rep — hold 2 minutes**

On your last rep, hold the erection in the cylinder for about 2 minutes before releasing.

4

**Exercise the nerves (nerve-sparing surgery patients)**

During sessions, use mental arousal. "The only way a man can get an erection is from what he thinks and what he sees. Arousal is what's going to help send good oxygenated blood into the penis." — Charles

5

**Minimum rep target: 10 morning + 10 evening**

At least 5 days a week — approximately 100 erections per week. Surgery patients: maintain for at least 2–3 weeks before reducing. Radiation patients on hormone therapy: maintain the 5-day schedule for as long as hormone treatments are present.

6

**Kegels — 3 sets of 10**

Immediately after pump session. Tighten 3 sec, relax 3 sec.

**MORNING AND EVENING**

"Did I mention that I need you to give me 8 to 10 more at night, too? Yes sir. 8 to 10 more at night, too." — Charles. Complete the routine twice daily — morning and evening.

## PHASE 2 — ACTIVE REHABILITATION: DURING AND AFTER TREATMENT

### SURGERY PATIENTS — START WITHIN 2–4 WEEKS POST-SURGERY

Once your catheter is removed and your physician has cleared you, begin the daily routine. The critical window is the first 4–8 months after surgery. Daily blood flow during this window is the single most important thing you can do for long-term recovery.

### RADIATION PATIENTS — START BEFORE RADIATION IF POSSIBLE

Begin before radiation starts. Continue every day throughout your radiation course and throughout all hormone therapy. Hormone therapy can suppress erectile function for 1–3 years after treatment ends. Low desire during this phase is not a lack of attraction — it is the body lacking testosterone.

**WHAT IS HAPPENING WITH EACH SESSION DURING TREATMENT**

- **Oxygen to cells** — prevents hypoxia and cell death in the erectile tissue.
- **Tissue stretch** — preserves elasticity and natural length that would otherwise be lost.
- **Smooth muscle exercise** — maintains the corpus cavernosum so girth is preserved.

## WHAT TO EXPECT DURING SESSIONS

**Pressure:** Mild abdominal pressure during use is normal. If uncomfortable, stop the pump and hold the erection in the cylinder for 2–3 minutes, then release slowly.

**Tightness:** The skin and head may feel tight — this is normal. If too uncomfortable, partially release pressure and hold 1–3 minutes.

**Pain:** Stop immediately. Rest 24 hours. Resume at lower pressure. If pain persists, contact your physician.

**Swelling at the base:** Normal engorgement, especially in early weeks. Reduces as tissue conditions over time.

## TRANSITIONING TO INTIMACY

When your physician clears you and erections are strong enough for penetration, you transition from therapy mode to intimacy use. Load the tension ring onto the cylinder before your session. Build a firm erection. Slide the tension ring from the cylinder base onto the base of the penis. Remove the cylinder. The ring maintains the erection for intimacy. Ring comes off within 30 minutes — always.

## 5-5-5 MAINTENANCE PROGRAM

> *"After the four to six weeks, you want to go into maintenance. We consider and call it 5-5-5.*
>
> *If you're having sex once a week — four days a week you need to be using a vacuum, five minutes morning or night.*
>
> *If you're having sex twice a week — three days a week, five minutes morning or night.*
>
> *If you're having sex five times a week — you don't need the vacuum.*
>
> *If you're not having sex — five times a week, five minutes, exercising your penis.*
>
> *To keep a healthy penis, you need to keep blood flow going into the penis. That is the way it was designed. Having an erection is a necessary body function."*
>
> **— Charles Hilson**

## PROSTATE CANCER FAQ

**How long do I have to use this pump?**

Active daily rehabilitation runs 6–12 months for surgery patients and 2–3 years for radiation and hormone therapy patients. After that, you transition to the 5-5-5 maintenance schedule.

**I am on hormone therapy. Is there any point in using the device?**

Yes — this is when it matters most. Hormone therapy eliminates the testosterone-driven stimulation that normally keeps penile tissue healthy. The device mechanically replaces that blood flow.

**When can I have sex?**

When your physician clears you and erections are firm enough for penetration. Use the tension ring protocol. There is no fixed date — it depends on your body's recovery.

**My surgery was months ago and I never started. Is it too late?**

No. Start today. The window is longer than most men are told.

SECTION 2

# PEYRONIE'S DISEASE PROGRAM

*Penile Stretching, Plaque Reduction & Rehabilitation*

## UNDERSTANDING PEYRONIE'S DISEASE

Peyronie's disease is the development of fibrous scar tissue — plaque — inside the penis that causes curved and often painful erections. The penis can curve upward, downward, left, or right. The vacuum device addresses both the curvature and the underlying ED simultaneously.

> *"We are using your blood to stretch the penis. Stretching it so we can help break that plaque down. By stretching it, not only are you breaking that plaque down, now you're getting the penis healthier. So actually you're killing two birds with one stone."*
>
> **— Charles Hilson**

## PEYRONIE'S DAILY ROUTINE — TWICE DAILY

### APPLY LUBRICANT IN THREE PLACES

1. **Around the rim of the cylinder**
   Thin even line all the way around — your vacuum seal.
2. **Inside the cylinder**
   Light coat to reduce friction as the penis expands.
3. **On the head of the penis**
   Apply lubricant directly to the head of the penis before insertion.

### THE STRETCHING PROTOCOL

1. **Stand up. Insert penis. Start motor.**
   Let the machine pull blood in until the penis curves and contacts the cylinder wall.

| | |
|---|---|
| 2 | **Hold each erection 15–20 seconds**<br>"You're gonna hold that erection for 15 to 20 seconds, then you're gonna release it, let it go soft." — Charles |
| 3 | **Release fully between cycles**<br>Allow the penis to become fully soft before starting the next cycle. |
| 4 | **Repeat for 5–10 minutes per session**<br>Complete as many 15–20 second hold cycles as you can in the time window. |
| 5 | **Do this morning AND evening**<br>"You wanna do this five to ten minutes in the morning, and five to ten minutes at night." — Charles |
| 6 | **Kegels to close — 3 sets of 10**<br>After each session. |

## TRACKING PROGRESS WEEKLY

"Take a marker on the outside of the cylinder and place a mark right there where the tip of the penis stops on the first erection. At the end of the week, put a mark where the tip of the penis stops on the last erection. We want that mark to move up. As it's moving up, it is stretching out." — Charles

**HOW LONG WILL IT TAKE?**

"Each person is different. There's no certain time on how long it takes for the plaque to break. But doing this regularly will help stretch it, help break the plaque, and at the same time help get your penis healthier." — Charles

**PAIN DURING STRETCHING**

**Firm pressure** = continue at that level. **Discomfort** = reduce pressure slightly. **Sharp pain** = stop. Rest 24 hours. Resume at lower pressure. If pain is consistent across multiple sessions, contact CBH at 947.224.7342.

## PEYRONIE'S MAINTENANCE

### PEYRONIE'S MAINTENANCE SCHEDULE

- 4–5 sessions per week (reduced from twice daily).
- 4–6 stretch cycles per session, held 10–15 seconds each.
- Kegels 3 sets of 10, three times per week.
- Monthly progress check — monitor for any regression.
- If curvature begins to return, return to full protocol immediately.

## PEYRONIE'S FAQ

**Will the curvature completely disappear?**

For mild to moderate curvature, significant straightening is typical with consistent daily stretching. For severe curvature, meaningful reduction is achievable. The CBH program maximizes non-surgical outcomes.

**Can I use the tension ring with Peyronie's?**

Yes, for intercourse use. Position carefully at the base. Start with the largest, softest ring. Contact CBH for sizing guidance if needed.

**Should I do standard rehabilitation in addition to stretching?**

No. The Peyronie's protocol replaces the standard routine — the stretch cycles still deliver all three benefits (oxygen, length, smooth muscle). Do not combine both routines in the same session.

SECTION 3

# GENERAL & ORGANIC ED PROGRAM

*Diabetes, Cardiovascular, Low-T, Lifestyle & Age-Related ED*

## UNDERSTANDING ORGANIC ED

Organic erectile dysfunction is caused by physical factors that reduce blood flow, nerve function, or hormone levels. Common causes include diabetes, cardiovascular disease, high blood pressure, Parkinson's disease, PTSD, medications, alcohol, poor diet, obesity, and vascular impairment. The penis has not been surgically or chemically disrupted — which means improvement is very much within reach.

**THE CORE CAUSE**

Strong erectile function depends on strong blood flow. When blood flow is reduced for any reason, the penile tissue does not receive the oxygen it needs. Every device session restores what the body is not doing naturally: oxygen to cells, elastic stretch for length, smooth muscle exercise for girth.

**IMPORTANT — CHECK YOUR TESTOSTERONE**

"Hormones are a necessary component for healthy erectile function. A simple blood test can show if there is a hormonal imbalance." If your doctor has not tested your testosterone levels, ask. Hormonal support combined with the CBH program produces better outcomes than either alone.

## DAILY ROUTINE — ORGANIC ED

| | |
|---|---|
| 1 | **Empty bladder. Stand. Apply lubricant.**<br>Rim and inside cylinder. Stand if possible. |
| 2 | **8–10 pump reps**<br>Pump until discomfort or motor stops. Hold 20–30 seconds. Release. Repeat 8–10 times. |

| | |
|---|---|
| 3 | **Final rep — hold 2 minutes**<br>Last erection of the session: hold in cylinder 2 minutes before releasing. |
| 4 | **Use mental stimulation during sessions**<br>Arousal amplifies blood flow. Use it every session. |
| 5 | **Kegels — 3 sets of 10**<br>After every session. |

## LIFESTYLE FACTORS THAT SUPPORT RECOVERY

### FOODS THAT HELP — NITRIC OXIDE

Nitric oxide dilates blood vessels and improves circulation to the penile region. Add these regularly: beets, leafy greens (spinach, arugula), pomegranates, watermelon, citrus, garlic, and nuts.

### ERECTION BLOCKERS — REDUCE THESE

"Limit erection blockers — alcohol, fatty foods, toxic relationships, social media." Alcohol reduces erectile function even at moderate amounts. Chronic stress elevates cortisol which suppresses testosterone.

### MOVEMENT, SUN, AND HYDRATION

"Implement a daily routine of movement, sun and hydration." Daily movement — even a 20-minute walk — improves cardiovascular blood flow. Sunlight supports vitamin D and testosterone production.

> *"Do things every day that make you happy. Play music. Get outside. Watch something funny. The internal pressure felt during therapy feels good, it feels familiar. This helps the brain nerve stimulation and healing."*
>
> **— Charles Hilson**

## INTIMACY FOR ORGANIC ED PATIENTS

**Using the Device for Intimacy:** Use the device to build an erection, apply the tension ring, remove the cylinder, and proceed. Start with the largest, softest ring. The ring maintains the erection for up to 30 minutes.

**Partner Communication:** Organic ED often develops gradually and both partners may have been quietly adapting around it for years. If desire is low due to hormonal issues, say that clearly — it is not about attraction, it is biology.

## 5-5-5 MAINTENANCE — ORGANIC ED

**ORGANIC ED MAINTENANCE — 5-5-5**

- If having sex regularly: use the vacuum the number of days per week that gets you to 5 total (sex + vacuum = 5).
- If not having sex: 5 sessions per week, 5 minutes each.
- Continue Kegels 3 sets of 10 daily.
- Annual blood panel: testosterone and cardiovascular markers.

## ORGANIC ED FAQ

**Will I need to use this device indefinitely?**

For many organic ED patients, yes — but in a lighter form. Daily intensive rehabilitation shifts to the 5-5-5 maintenance schedule.

**Can I use the device alongside oral ED medication?**

Yes. Vacuum therapy and oral ED medications work differently and complement each other. The device bypasses the nerve signal requirement that limits medications when nerve function is impaired.

**My erections improved then got worse again — is that normal?**

Yes. Organic ED fluctuates with overall health, stress, sleep quality, and lifestyle. The program is a tool that works as long as you use it consistently.

**Is low desire the same as ED?**

No. Low libido is often hormone-related and separate from the physical ability to achieve an erection. If you have low desire, a testosterone blood test is the right starting point.

## CONTACT AND RESOURCES

### WE ARE HERE FOR YOU — ANYTIME

Text or call us, send an email, or visit the website. We are here for every man in this program — before your first session, during your recovery, and whenever you have a question.

**Text or Call:** 947.224.7342

**Email:** info@cbhmedicalrehab.com

**Website:** cbh4men.com

**Video tutorials:** cbh4men.com/tutorial

**E-book:** cbh4men.com/ebook

**Spanish program:** cbh4men.com/espanol

**WE CHECK IN WITH EVERY MEMBER**

You are not on your own with this. Text us, email us — we are here for you anytime throughout your program. Most questions get answered the same day.

**Text or Call: 947.224.7342 | info@cbhmedicalrehab.com**