The Pelvic Floor Training Chair

SPECIALIST INFORMATION

TRAINING METHOD – MAGNETIC FIELD TECHNOLOGY DEVICES
APPLICATIONS & STUDIES

YOUNG MOTHERS
Recovery
Bladder weakness
Increased libido

FEMALE VITALITY
Menopause
Cellulite
Tissue toning
Increased libido

INCONTINENCE
Bladder weakness
Bowel weakness
Leaking
Prevention

MALE VITALITY
Increased potency
Prostatectomy
Rehabilitation

BACK PAIN
Back pain
Relaxation
Strengthening
Posture

www.cosmetech.co.uk
INTRODUCING THE NEW PELVIC FLOOR TRAINING CHAIR - TRAINING FOR A STRONGER PELVIC FLOOR

We are delighted to introduce the new Pelvic Floor Training Chair, to our clinics in Belfast and London. It is now available at Cosmetech’s Chelsea Private Clinic in London and The Maypole Clinic, Holywood.

The Pelvic Floor Training Chair was developed to help men and women whose life can be restricted by embarrassing and often painful symptoms. The Chair treats patients with conditions ranging from damage and weakening of the pelvic muscles caused during childbirth, to post prostate surgery. The clinic offers a multi-disciplinary approach to patient care, and the diagnosis and treatments of pelvic floor disorders.

Approximately 1 in 3 women experience health problems from a weak pelvic floor at some point in their lifetime. For many years women thought that their incontinence, bladder control and other problems, especially after childbirth, were to be expected and that they just had to tolerate them. They were sometimes either too embarrassed to seek help, or unaware that there are effective treatments available, and sometimes had to plan their days and journeys around knowing where toilets are located, in order to avoid ‘accidents’. Very often we can help these people.

The clinic undertakes a number of assessment procedures. Patients present typically with a variety of conditions, including poor bowel control or incontinence, long term constipation problems and difficulty in emptying the bowel. Treatment may require surgery or one of our new non-surgical solutions such as the Pelvic Floor Chair. The Chair is a new method that trains your pelvic floor and the surrounding muscles effectively. The holistic concept combines state-of-the-art medical technology with targeted support for independent training. It comprises the two components: The Pelvic Floor Training Chair with RPMS and the Bio-Feedback-Trainer. We have also introduced a new radio frequency treatment called ThermiVa which offers a solution to many of the gynaecology problems associated with childbirth and ageing.

Biofeedback Training
Retraining known as Biofeedback is used to improve bowel habits. This non-invasive treatment involves retraining muscles to relax, or the strengthening of muscle tone in the back passage and pelvic floor, depending on the patients’ symptoms. The programme can last between 1-6 months and has an 80% success rate.

Pelvic Floor Chair
The clinic has introduced a new non-invasive training method for your pelvic floor which is a chair that treats you with magnetic field therapy to strengthen the musculature. You sit on the chair in your normal clothing, for 15 minutes per session (for a minimum of 4 sessions depending on the programme) with a specialist nurse, physiotherapist or therapist. It is more effective than standard individual training and is confirmed by scientific studies and recommended by doctors. You will notice improvement in your muscles from the first session.

Indications include:
- Incontinence (bowel weakness, bladder weakness, leaking, prevention)
- Young mothers (post natal, bladder weakness, increased libido)
- Female vitality (menopause, cellulite, libido)
- Male Vitality (increased potency, post-prostatectomy rehabilitation)
- Back pain (relaxation and posture)
- TissueToning (prevention, strengthening and tissue toning)

ThermiVa
Cosmetech has also introduced a new radio frequency device called ThermiVa. This is a new non-surgical treatment that rejuvenates the vagina and vulva without plastic surgery. The treatments use radiofrequency energy to gently heat tissue, without discomfort or downtime.

Used to treat:
- Urinary incontinence (improves bladder control)
- Improves sexual function
- Vaginal tightening
- Sexual enhancement
- Vaginal rejuvenation
- Labia reduction
- Female genital enhancement
The pelvic floor is one of the main muscle groups of the body consisting of three layers. Similar to a taut trampoline, the organs of the abdomen (such as the bladder) provides a stable hold. It includes the anal sphincter, the urethra and the vagina or root of the penis.
EFFECTS OF LESS TRAINED CARE OF THE BODY

AGING OF THE POPULATION: More diapers for seniors, less for babies: The market for incontinence products is growing worldwide. Every year by more than 8 percent. In the US alone, sales have tripled over the past 15 years.

Deutsche Wirtschafts Nachrichten | published: 07.11.2014

MARKET FOR INCONTINENCE PRODUCTS
8 % GROWTH PER YEAR

ERECTILE DYSFUNCTION (IMPOTENCE): 19 percent of all men between 30 and 80 years have erectile dysfunction. 7 percent feel this as a burden and are in need of therapy (Questionnaire with 4489 probands)

INCONTINENCE

WORLDWIDE

GLOBAL POPULATION 7.5 BN (2018)
423 MIL *
PEOPLE SUFFER FROM BLADDER WEAKNESS

POPULATION IN EUROPE 510 MIL (2016)
51 MIL
PEOPLE SUFFER FROM BLADDER WEAKNESS

POPULATION IN MIDDLE EAST 411 MIL (2016)
45 MIL
PEOPLE SUFFER FROM BLADDER WEAKNESS

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WHAT IS THE NEW PELVIC FLOOR TRAINING®

PELVIC FLOOR TRAINING CHAIR

MAGNETIC FIELD THERAPY (MFT)

RPMS: This technical term stands for repetitive peripheral muscle stimulation, also known as ‘extracorporeal magnetic stimulation’. It is particularly suited to neuromuscular training and strengthening of the pelvic floor among people who are unable to complete independent training in a standard setting or would simply like to exercise more effectively.

PELVIC FLOOR TRAINING CHAIR

BIO-FEEDBACK-TRAINING (BFT)

The Bio-Feedback-Trainer supports the patient’s independent training. An integrated sensor detects the activity of the pelvic floor muscles. This enables visualisation of muscle movement on a monitor during training. This bio-feedback increases the effectiveness of the training and the self-perception of the pelvic floor.

NEW

A combination of cutting-edge medicine and effective independent training

SIMPLE

Non-invasive, i.e. no special clothing; simple to use

EFFECTIVE

Scientifically confirmed by international studies

EFFECTIVE

The stimulation technology fitted to the seating surface generates vertical magnetic field impulses of up to 2 tesla. The training produces substantially greater effects than could ever be achieved by patients training alone.

“Magnetic field stimulation is especially suitable for strengthening the body core. It provides an excellent, deep penetrating effect for effective neuromuscular training.”

UNIV-PROF DDR. WINFRIED MAYR

Prof. for Biomedical Engineering and Rehabilitation Technology at the Medical University of Vienna
HOW IT WORKS

RPMS MAGNETIC FIELD STIMULATION

It comprises a stimulation system that is embedded in the surface of the seat. This stimulation system and the associated electronics generate repetitive magnetic impulses lasting 200 to 500 µs with a magnetic flux density of approx. 0.5 tesla and the maximum field strength at the coil of up to 2 tesla. The electric induction produced in this way elicits electrical potential shifts in the overlying tissue that are so pronounced as to bring about depolarisation of the peripheral nerves. The resulting action potential of the depolarised nerves leads to contractions of the connected muscles.

Each impulse generates an individual contraction or a brief muscle spasm. Above a certain frequency, known as the ‘fusion frequency’, the individual contractions become tetanus. This state occurs between 15 and 25Hz, depending on the muscle type. Any additional increase beyond the fusion frequency induces a rise in the speed and force of contraction, but also to more rapid muscle fatigue and changes in the training stimulus. The stimulation technology creates an impulse sequence of between 5 and 50Hz.

The Pelvic Floor Training Chair does not selectively target individual muscles, but acts on all of the muscles around the pelvis, the gluteus and the upper thighs. As a result, all of the important muscle groups are exercised at once, which is particularly effective for the muscles that have suffered most from lack of use. This significantly improves the prospects for targeted restoration of muscle coordination.

However, a consequence of depolarising the motor system nerves through extracorporeal magnetic stimulation is a proprioceptive reflux of data to the brain, which is generated intracorporally.

It has been demonstrated that this externally generated sensory information sent back to the brain is capable of creating lasting changes in the cortical representation, enhancing personal awareness of and the ability to control and indirectly, also coordinate individual muscle functions.

The effective area can be adjusted up to a width of 18 cm. In this way, the therapy method can even be used to treat adipose patients.

RPMS stimulates the pelvic floor muscles at a neuromuscular level. The micro-massage effect significantly stimulates circulation throughout the trunk and lower lumbar region. With RPMS, slight fascial adhesions or scarring can be resolved. This passive training with RPMS can precede active training for patients who cannot willingly contract their pelvic floor because it is not strong enough.

RPMS helps patients who are unable to identify their pelvic floor musculature to quickly and clearly localise the musculus levator ani. For patients who have limited mobility, passive pelvic floor muscle training with RPMS has been shown to be one of the most successful alternatives.

“Magnetic field stimulation is a proven alternative to traditional electro-therapy. Electro-therapy always involves intervention in the most intimate parts of our bodies and has to be performed using invasive electrodes. In contrast, Pelvic Floor Training Chair ensures a more pleasant experience for the patient and the attending physician or therapist and takes a lot less time.”

UNIV-PROF DDR. WINFRIED MAYR
Prof. for Biomedical Engineering and Rehabilitation Technology at the Medical University of Vienna
THE PELVIC FLOOR TRAINING CHAIR

MAGNETIC FIELD TRAINER

TOUCHSCREEN
The training programmes are configured and activated simply and intuitively using the user-friendly touchscreen.

ADJUSTABLE MAGNETIC FIELD COIL
The magnetic field coils fitted below the seat generate brief, repetitive magnetic field impulses. This stimulation reliably strengthens the pelvic floor and the surrounding musculature.

The coil can be moved 18 cm forwards or backwards, ensuring that each patient receives ideal training.

SEATED POSITION
The individually customisable seated position allows the patient to adopt a comfortable and effective posture during magnetic field therapy.

SAFETY
Automatic detection of metal implants

ADJUSTABLE ARMREST
The armrest can be folded up as necessary. This makes the system easier to access, e.g. for wheelchair users.
SETTING OPTIONS

SIMPLE OPERATION OF THE SYSTEM

- Intensity in 5 levels of effective field strength in % 20/40/60/80/100
- Frequency of 5 – 50Hz repeated impulse rate per second
- Contraction time of 1 – 12 sec. Muscle contraction period
- Pause of 1 – 12 sec. Muscle relaxation time
- Effect field position: 18 cm horizontal effective field gap
- Adjustable elements for the effective field applicator, back and foot rest
- Pause button to interrupt and continue training
- Automatic step-in and step-out position

SAFETY

- Automatic detection of metallic implants. The mechanism prevents contraindicated application. Only the Pelvic Floor Training Chair offers this integrated safety feature worldwide.
## TECHNICAL SPECIFICATIONS

### THE PELVIC FLOOR TRAINING CHAIR

<table>
<thead>
<tr>
<th>Specification</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main Voltage and Frequency Power Consumption</strong></td>
<td>230 V ~, 50 Hz max. 430W (2.5 A / 230 V)</td>
</tr>
<tr>
<td><strong>Dimensions (L/W/H)</strong></td>
<td>130 x 85 x 155 cm</td>
</tr>
<tr>
<td><strong>Weight</strong></td>
<td>150 kg</td>
</tr>
<tr>
<td><strong>Stimulation Frequency Therapy Time</strong></td>
<td>5 to 50 Hz</td>
</tr>
<tr>
<td><strong>Pulse Time</strong></td>
<td>freely programmable 1 to 10 s</td>
</tr>
<tr>
<td><strong>Pause Time</strong></td>
<td>1 to 20 s</td>
</tr>
<tr>
<td><strong>Connectivity Therapy Programs Therapy Accounting</strong></td>
<td>LAN/Internet</td>
</tr>
<tr>
<td><strong>Operating Panel</strong></td>
<td>fully configurable via LAN remote via LAN/Internet</td>
</tr>
<tr>
<td><strong>Tilt Angle of the Chair</strong></td>
<td>Flexible touch screen for patient and therapist 0° to 20°</td>
</tr>
<tr>
<td><strong>Tilt Angle of the Foot Rest Armrests hinged</strong></td>
<td>-90° to -30° (rel. to the chair)</td>
</tr>
<tr>
<td><strong>Armrest Width adjustable</strong></td>
<td>up or down foldable on both sides</td>
</tr>
<tr>
<td><strong>LCD-Screen</strong></td>
<td>10.1 inch (Color Touch Screen Display)</td>
</tr>
<tr>
<td><strong>Product category</strong></td>
<td>Magnetic field therapy device</td>
</tr>
<tr>
<td><strong>Label</strong></td>
<td>PelviPower®</td>
</tr>
<tr>
<td><strong>Corresponding EC regulations</strong></td>
<td>EC medical devices directive (93/42/EEC)</td>
</tr>
<tr>
<td><strong>Classification</strong></td>
<td>IIa (according to MDD, annex IX)</td>
</tr>
<tr>
<td><strong>Name, adress and registration No. of the notified body</strong></td>
<td>TÜV SÜD Product Service GmbH, 80339 München</td>
</tr>
<tr>
<td><strong>Reg. Number</strong></td>
<td>CE no.0123</td>
</tr>
<tr>
<td><strong>Valid until</strong></td>
<td>2020-12-31 (according to EC certificate G1 15 12 32017 012)</td>
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</table>
The Bio-Feedback-Trainer (BFT) is one of the first ergonomically adaptive training devices. The monitor visualises the patient’s independent training of their pelvic floor. Body awareness is improved and enhanced in a playful setting.

The patient sits in the device, fully clothed. This enables relaxed training.

A sensor integrated in the seat registers the activity of the pelvic floor muscles, displaying the intensity on the screen. During the training, the pelvic floor tenses. This tension is held for a specific period of time, and then the muscles relax again. These exercises are repeated several times. The muscle movements are visualized on a monitor during the training. A graphic on the display informs the patient to tighten and relax the muscles. The patient follows a specified curve with their muscle movement.

The sensor can be adjusted perfectly to fit the patient’s body. In combination with the adjustable backrest, the training can be performed in a relaxed, seated position. The BFB is therefore ideal to provide targeted training of the pelvic floor to achieve optimal training results.

BENEFITS FOR THE
CLIENT

- The Bio-Feedback-Trainer strengthens personal body awareness.
- Effective pelvic floor training in 10 minutes.
- Training in normal clothes – no 'embarrassing tunics'.

Biofeedback training is the efficient alternative for persons who are contraindicated for magnetic field training.
THE PELVIC FLOOR BIO-FEEDBACK-TRAINER

DISPLAY
Screen visualisation instructs the patient when to contract and relax their muscles. The movement of the muscles during training is shown on the screen.

BIOFEEDBACK SENSOR
A sensor integrated in the seat registers the activity of the pelvic floor muscles, displaying the intensity on the screen.

BACKREST
Ergonomic backrest for stable support during training.

ADJUSTABILITY
The sensor can be adjusted individually to suit the body, ensuring unbeatable training results.
This study investigated the effectiveness of RPMS and classic pelvic floor training on a total of 112 study participants over a period of 12 weeks. The findings indicate that the subjective feeling of stress of the RPMS subjects dropped significantly over the course of therapy, which represents a significant increase in the average quality of life where urinary incontinence was concerned. The pelvic floor subjects also experienced a subjective improvement in their stress levels and thus an enhancement in their quality of life – although nowhere near as significant a level as in the RPMS group. RPMS subjects were therefore significantly more satisfied with the training and most of them would endorse its use.
Followups were performed at months 1, 2, 5, 8 and 14. Results: At 2 months 45 of 60 subjects (75%) in the active arm vs 13 of 60 (21.7%) in the sham arm were treatment responders (p <0.001). After 2 months 24 subjects (40%) in the active arm and 41 (68%) in the sham arm elected additional active pulsed magnetic stimulation. At 14 months, subjects who received 32 sessions of active pulsed magnetic stimulation had the highest percentage of treatment responders (18 of 24 or 75.0%), followed by those who received 16 sessions (26 of 36 or 72.2% and 28 of 41 or 68.3%) and those who did not receive any active pulsed magnetic stimulation (4 of 19 or 21.1%) (p <0.001).

Materials and Methods: This randomized, double-blind, sham controlled study was performed in 120 female subjects at least 21 years old with stress urinary incontinence. Treatment involved pulsed magnetic stimulation for 2 sessions per week for 2 months (16 sessions).

After 2 months, subjects could opt for 16 additional sessions regardless of initial randomization. The primary response criterion was a 5-point reduction in the ICIQ-UI SF (International Consultation on Incontinence Questionnaire for Urinary Incontinence-Short Form) score. Key secondary response criteria included objective and subjective cure, supplemented by other secondary criteria.

Followups were performed at months 1, 2, 5, 8 and 14. Results: At 2 months 45 of 60 subjects (75%) in the active arm vs 13 of 60 (21.7%) in the sham arm were treatment responders (p <0.001). After 2 months 24 subjects (40%) in the active arm and 41 (68%) in the sham arm elected additional active pulsed magnetic stimulation. At 14 months, subjects who received 32 sessions of active pulsed magnetic stimulation had the highest percentage of treatment responders (18 of 24 or 75.0%), followed by those who received 16 sessions (26 of 36 or 72.2% and 28 of 41 or 68.3%) and those who did not receive any active pulsed magnetic stimulation (4 of 19 or 21.1%) (p <0.001).
In a pilot study at the Institute for Sports Science at the University of Vechta, 59 participants (44 women and 15 men) were interviewed about training with the Bio-Feedback-Trainer. The subjects used the Bio-Feedback-Trainer for three months; they expressed satisfaction with the device and acceptence of the method. They rated training of the pelvic floor musculature as clearly noticeable, without experiencing an excessive degree of exertion. The study revealed that the subjects experienced a reduction in involuntary urine loss, despite the short intervention period of 3 months. According to the study, the drop in the number of incontinence pads required after the intervention further substantiates this finding.

EXCERPT: The study investigated the functionality of the Bio-Feedback-Trainer in an EMG measurement. Besides the pelvic floor musculature, the study investigated the activity of three other muscle groups (internal obliques, gluteus maximus, long adductor) when training with the biofeedback device. For all subjects, the findings demonstrate clear and extremely comparable evidence for training of the pelvic floor using the Bio-Feedback-Trainer. It is therefore a very suitable device to train the pelvic floor musculature. Moreover, the study proved that for the first time, the biofeedback function enables tracking of the pelvic floor activity without intimate contact.
ABSOLUTE CONTRAINDICATIONS

• PREGNANCY
  It is strictly forbidden to administer treatment with Magnetic Field Therapy if the patient is pregnant or plans to conceive during the treatment phase.

• METALLIC IMPLANTS BETWEEN THE KNEE AND THE NECK
  Spirals, hip implants, knee joint prostheses (up to 10 cm above the knee joint), bolts, nails and equivalent
  **NOTE:** The term ‘metal’ does not refer solely to ferromagnetic metal, but to any kind of metallic alloy.

  The Pelvic Floor Training Chair is the only device worldwide to offer a safety monitor that prevents system activation if the monitor detects a metal implant or similar. Highest possible safety standard.

• ELECTRICALLY CONTROLLED IMPLANTS BETWEEN THE KNEE AND THE NECK
  Insulin pumps, pacemakers, neurostimulators
  **NOTE:** Strong magnetic fields have the potential to interfere with electronic devices located in these fields, or to cause these devices to malfunction.

• NON-METALLIC IMPLANTS BETWEEN THE KNEE AND THE NECK
  The therapy method has pronounced effects on the musculature throughout the entire urinary tract. The elicited muscular movements may indirectly displace an implanted mesh in an unforeseeable manner.
  **NOTE:** Magnetic Field Therapy must not be carried out without written permission from the attending physician in this case.

• PREVIOUS SURGERY
  If a patient has undergone surgery on an area exposed to the effective magnetic field over the last 8 to 10 weeks, then the treatment must be coordinated with the attending physician, taking into account the severity of the surgery or the healing process.
  **NOTE:** Magnetic Field Therapy must not be carried out without written permission from the attending physician in this case.

• CARDIAC DISEASES/CARDIAC ARRHYTHMIA
  When treating patients suffering from heart disease, the treatment must be coordinated with the attending physician, taking into account the severity of the condition.
  **NOTE:** Magnetic Field Therapy must not be carried out without written permission from the attending physician in this case.

• EPILEPSY
  When treating patients suffering from epilepsy, the treatment must be coordinated with the attending physician, taking into account the severity of the condition.
  **NOTE:** Magnetic Field Therapy must not be carried out without written permission from the attending physician in this case.
<table>
<thead>
<tr>
<th>RELATIVE CONTRAINDICATIONS</th>
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<tbody>
<tr>
<td>The following indications are not absolute criteria to reject treatment out of hand. But experience has shown that patients must expect discomfort during treatment: Menstruation, acute infection in the urogenital tract, painful haemorrhoids, fever</td>
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<table>
<thead>
<tr>
<th>SIDE EFFECTS THAT HAVE MANIFESTED DURING TREATMENT</th>
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</thead>
<tbody>
<tr>
<td><strong>VERY FEW OR ALMOST NO SIDE EFFECTS</strong></td>
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<tr>
<td>Over 95% of patients report very slight or no side effects from the therapy. The therapy is very well tolerated. Patients frequently report of their surprise at noticing unexpectedly positive results.</td>
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<tr>
<th><strong>SLIGHT MUSCLE ACHE</strong></th>
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<tr>
<td>Some patients reported minor muscle ache after the first few sessions. This effect is because the pelvic floor had never been trained before. This is why it is important to select a low-intensity setting at the beginning to allow the musculature to adjust to the treatment.</td>
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<table>
<thead>
<tr>
<th><strong>SEVERE MUSCLE ACHE</strong></th>
</tr>
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<tbody>
<tr>
<td>A small number of patients report severe muscle ache, either because they are very sensitive or very motivated and select a high training level too quickly. The intensity of training was adjusted to an excessive level in one such case.</td>
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<table>
<thead>
<tr>
<th><strong>DIZZINESS</strong></th>
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<tr>
<td>This side effect was observed primarily among patients at a very advanced age. RPMS therapy activates the entire circulatory system. Patients are advised to rest and remain seated in the therapy chair for around 5 minutes after treatment.</td>
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<thead>
<tr>
<th>POSITIVE SIDE EFFECTS THAT HAVE MANIFESTED DURING TREATMENT</th>
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<tbody>
<tr>
<td><strong>ALLEVIATION OF BACK PAIN</strong></td>
</tr>
<tr>
<td>Many patients treated for incontinence have also reported a simultaneous alleviation of back pain, especially in the lower lumbar region. Pre-existing back complaints have also improved remarkably.</td>
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<thead>
<tr>
<th><strong>TIGHTENING OF THE BUTTOCKS AND UPPER THIGHS</strong></th>
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<tbody>
<tr>
<td>Younger, female patients in particular report that their buttocks are tightened and their upper thighs strengthened. Experience has also shown an improvement in cellulite structures.</td>
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</table>
THE PELVIC FLOOR TRAINING CHAIR

STANDARD THERAPIES

OPTIONS FOR THERAPY AND TRAINING

- The standards were developed by experts from the scientific and practical communities and differ according to intensity, frequency, coil settings and duration, depending on where they will be applied.

- The client cards contain standardised presets for the entire training programme and can be adjusted by the therapist or physician to suit individual requirements.

STANDARD THERAPIES

- **INCONTINENCE**: Bladder weakness, bowel weakness, leaking, prevention

- **YOUNG MOTHERS**: Recovery, bladder weakness, increased libido

- **FEMALE VITALITY**: Menopause, cellulite, tissue toning, increased libido

- **TISSUE TONING**: Prevention, strengthening, improvement

- **BACK PAIN**: Back pain, relaxation, strengthening, posture

- **MALE VITALITY**: Increased potency, prostatectomy, rehabilitation

TAILORED TREATMENTS

FOR SUCCESSFUL TRAINING

The Pelvic Floor Training Chair expert team has used the experience acquired from several years of application to propose standard treatment regimes. The standards can be adjusted individually. Operators, physicians and therapists are warmly invited to submit their own therapy proposals for review with our expert team.
ROUNGLY
423 MIL PEOPLE
AROUND THE WORLD
SUFFER FROM BLADDER
WEAKNESS*

INCONTINENCE

Are you familiar with the situation?
Your bladder dominates the day,
while dripping or involuntary urine
loss reduce your quality of life.
Diapers and pads are only
a temporary solution.

The Pelvic Floor Training Chair helps you to
train your pelvic floor (pelvic muscles)
and learn to control your bladder.
Reclaim your freedom and
joy of life!

STANDARD PELVIC FLOOR TRAINING CHAIR PACKAGE
4-20 training sessions on the Pelvic Floor Training Chair
and 4 sessions of Bio-Feedback-Trainer

* Irvin, Kopp, Agatep, et al.;
Worldwide prevalence estimates of lower urinary tract symptoms, overactive bladder,
urinary incontinence and bladder outlet obstruction;

„PelviPower (the Pelvic Floor Training Chair) is a safe
and effective 21st century
evidence based
Physiotherapy
treatment tool.
It greatly aids outcomes
for patients with poor
pelvic floor muscle function
who find it hard to do
or adhere to training.

Pelvic Floor Muscle
problems for patients
are awful but the good
news is that PelviPower (the
Pelvic Floor Training Chair)
results are great!“

AOIFE NI Eochaídh
Clinical Specialist Physiotherapist,
B.Sc. (Hons), PGd. Cert in Women’s Health,
Bon Secours Hospital, Galway, Ireland
One in three women suffers from bladder weakness after childbirth*

Postnatal Pelvic Floor Exercises

You are over the moon about your baby, but the birth caused overexertion to your pelvic floor (pelvic muscles). Help your pelvic floor to regenerate to prevent any problems later on. With the Pelvic Floor Training Chair, you can strengthen the core of your body and regain your vitality.

Standard Package
8 training sessions on the Pelvic Floor Training Chair and 4 sessions of biofeedback training

Strengthening Prior to Birth
Help your pelvic floor to prepare for childbirth. The Bio-Feedback-Trainer shows you how to contract and relax your pelvic floor. That way you can learn how to control it.

Standard Biofeedback Package
10 sessions of biofeedback training

* Boyle R, Hay-Smith EJC, Cody JD, Morved S Cochrane Database of Systematic Reviews 2012; Issue 10

Menopause and Libido are an Issue for 10% of all women*

Female Vitality

Use your newfound energy from your body’s core to experience menopause with verve and confidence.

Regain your desire to experience and explore your own sexuality. Your pelvic floor plays a key role in how you experience sexuality.

The Pelvic Floor Training Chair training improves sexual sensitivity and increases libido.

Standard Package
4-8 sessions on the Pelvic Floor Treatment Chair and 2-4 sessions of biofeedback

Strengthening Prior to Birth
Help your pelvic floor to prepare for childbirth. The Bio-Feedback-Trainer shows you how to contract and relax your pelvic floor. That way you can learn how to control it.

Standard Biofeedback Package
10 sessions of biofeedback training


85% of women over 20 suffer from cellulite*

Tissue Toning

Are you one of the many women who suffer from weak connective tissue or cellulite?

Pelvic Floor Training Chair stimulates superficial and deep-lying tissue layers and increases cellular metabolism.

This helps to tighten the contours of your abdomen, thighs and buttocks.

Standard Package
4-8 sessions on the Pelvic Floor Treatment Chair and 2-4 sessions of biofeedback

* Boyle R, Hay-Smith EJC, Cody JD, Morved S Cochrane Database of Systematic Reviews 2012; Issue 10


Have you ever experienced that drooping sensation? One in five men experience erectile problems over the course of their lives.

The Pelvic Floor Training Chair induces a markedly improved circulation in the genital area. This is a key factor in achieving and sustaining an erection.

STANDARD PACKAGE
4-8 sessions on the Pelvic Floor Treatment Chair and 2-4 sessions of biofeedback

“Have you ever experienced that drooping sensation? One in five men experience erectile problems over the course of their lives. The Pelvic Floor Training Chair induces a markedly improved circulation in the genital area. This is a key factor in achieving and sustaining an erection.”

Are you one of the many people who suffer from pain in the lower lumbar region?

With the Pelvic Floor Training Chair, you can strengthen your pelvic floor and contribute significantly to improving your posture and relaxing your back muscles.

STANDARD PACKAGE
4-8 sessions on the Pelvic Floor Treatment Chair and 2-4 sessions of biofeedback

BACK PAIN

MALE VITALITY

BACK PAIN IS AMONG THE FIVE MOST FREQUENT CONDITIONS WORLDWIDE*

AROUND 50% OF MEN OVER 40 SUFFER FROM ERECTILE DYSFUNCTION*
FREQUENTLY ASKED
QUESTIONS
IS IT TRUE THAT I DON’T HAVE TO UNDRESS AND THAT TREATMENT DOES NOT INVOLVE ATTACHING OR INSERTING PROBES OR SUCH LIKE? HOW IS IT POSSIBLE THAT I DON’T HAVE TO CONTRIBUTE ACTIVELY TO THE TRAINING AND CAN I DO ANYTHING WRONG?

Through the use of magnetic waves, transmission-free signals are transported into the muscles. Magnetic waves can pass through the body without resistance. This makes it possible for patients to stay fully dressed without changing clothes for training. The patient takes a seat in the comfortable and individually adjustable training chair and allows the technology to do its work. During treatment, the muscles in the pelvic floor will rhythmically contract and relax without the patient being required to do anything at all. The treatment is so simple that there is literally nothing that a patient could do wrong. During treatment, patients may also read, use the phone or do similar things.

WHAT ADVANTAGES DOES PELVIC FLOOR TRAINING WITH THE PELVIC FLOOR TRAINING CHAIR OFFER ME COMPARED TO CLASSIC PELVIC FLOOR TRAINING?

The most important advantages are that the PelviCenter training does not require any effort from the patient and that it has a stronger effect than classic pelvic floor exercises or than is possible through independent training of the pelvic floor. What’s more, the training produces noticeable results in a much shorter time. It also strengthens all of the muscles in the core of the body, which can result in a marked improvement in muscular coordination in this area of the body.

HOW LONG DOES IT TAKE TO NOTICE AN IMPROVEMENT IN MUSCLE TONE? HOW MANY TRAINING SESSIONS ARE REQUIRED BEFORE AN IMPROVEMENT IS FELT?

Most users tend to notice the benefits of the Pelvic Floor Training Chair fairly quickly. The rate of improvement is different for every patient, although most patients report an improvement after around the 5th session, some earlier and some later. Overall, the first few treatment sessions tend to produce improvements quickly, while the subsequent sessions continue to strengthen and tone the muscles with each passing session.

WHAT HAPPENS IF THE SCHEDULED NUMBER OF SESSIONS IS INSUFFICIENT? WHAT HAPPENS IF THE THERAPY FAILS TO PRODUCE THE ANTICIPATED SUCCESS?

There are only very few patients that do not respond to Pelvic Floor Training Chair training. In very rare cases, even a 20-session training series may fail to produce the anticipated results. Practical experience has shown that, for instance, patients who have undergone surgery to raise the urethra and the sphincter mechanism or a radical hysterectomy are sometimes significantly less likely to benefit from therapy. The same applies to patients who have suffered damage to the relevant muscle nerves; in this case the therapy would not have the desired effect and would not be advised because of the poor to absent prospects for success. However, every patient will be seen by their doctor over the course of the treatments for an intermediate consultation to discuss the results so far. If training has not been successful, an advisable option would be to change the settings used. The settings are then optimised in consultation with the doctor; the patient will also be monitored over a suitable period. It may be necessary to consult with the system developer.
HOW LONG DO THE EFFECTS LAST? ONCE TRAINING HAS BEEN SUCCESSFULLY COMPLETED, WILL I HAVE TO RETURN FOR MORE THERAPY IN FUTURE?
There is no single answer to this question. Firstly, the persistence of the effects of the Pelvic Floor Training Chair depends on the ‘condition’ in which the patient is discharged, and secondly on whether the patient is able to take up independent training themselves or physical exercise. The results will last much longer if the patient is able to do so after therapy. The aim is always to achieve this goal, as the patient may then no longer need any additional PelviCenter therapy, even at an advanced age. If the patient is unable to train or exercise independently in any reliable form, experience has shown that they will benefit from repeating the training 6 to 12 months after the initial therapy, at least every now and then, even just once a week.

WOULD IT BE HELPFUL IF I EXERCISE MY PELVIC FLOOR BY MYSELF AS WELL? WOULD THAT MAKE THE TREATMENT MORE SUCCESSFUL AND WOULD IT PERSIST FOR LONGER?
To date, there is no evidence that performing additional pelvic floor exercises speeds up treatment success. However, patients should start exercising their pelvic floor muscles themselves as early as possible. The PelviCenter therapy enables patients to feel their pelvic floors earlier and more distinctly than with standard exercises. One benefit is that the patient quite quickly and purposefully develops improved body awareness of their pelvic floor muscles and can therefore train independently to stabilise the success of the treatment over time.

IS THE PELVIC FLOOR TRAINING CHAIR ALSO USED DURING REHABILITATION AFTER APROSTATECTOMY?
Yes, the Pelvic Floor Training Chair is used to treat postoperative urinary incontinence and other conditions during rehabilitation after a prostatectomy. This takes time. The chances of success can be significantly improved if the patient starts treatment soon after surgery. PelviCenter therapy is not recommended for patients suffering from an enlarged prostate and the associated hypersensitivity.

CAN THE PELVIC FLOOR TRAINING CHAIR BE USED AS A PREVENTATIVE MEASURE?
I DON’T HAVE ANY COMPLAINTS, BUT COULD TRAINING HELP PREVENT PROBLEMS IN THE FUTURE?
Yes. In principle, the Pelvic Floor Training Chair is also suitable for use as a preventative measure. This is because PelviCenter therapy is capable of significantly strengthening the pelvic floor muscles in a very short period of time, depending on the initial state. Furthermore, training on the Pelvic Floor Training Chair can also contribute to toning and tightening the buttocks.

IS THE PELVIC FLOOR TRAINING CHAIR WELL TOLERATED?
Patients tend to report that they tolerate therapy well to very well. The therapy is not strenuous in any way, but still stimulates blood circulation. Patients tend to experience the increase in blood flow to tissues that is induced during and after a training session on the PelviCenter as pleasant and persistent.
10. WHAT HAPPENS IF I FEEL A SUDDEN URGE TO URINATE DURING TREATMENT?
In principle, emptying the bladder prior to treatment is recommended, but not necessary. Due to the muscle stimulation provided during treatment, it is very rare for patients to feel a sudden urge to urinate. However, if a patient ever does need to visit a toilet, it is absolutely no problem to pause the PelviCenter. Treatment then continues from the same point when the patient returns from the toilet.

11. ARE THERE ANY HEALTH-RELATED RESTRICTIONS? WHEN MUST THE PELVIC FLOOR TRAINING CHAIR NOT BE USED?
Yes, there are a number of health conditions for which PelviCenter therapy is not advisable, and they are listed under absolute contraindications. The Pelvic Floor Training Chair should not be used during pregnancy, in conjunction with electronic or metallic implants in the area between the knee and neck (e.g. insulin pump, pacemaker, defibrillator, hormone-releasing IUD, joints made of metallic alloys, metallic screws, nails, etc.), in the area from 10 cm of the thigh above the knee up to the lower abdomen, in patients with epilepsy or severe cardiac arrhythmias. In the case of surgery or radiation, the therapy may only be carried out 4 weeks after the treatment. Treatment may, amongst others, also cause discomfort during a fever, acute urogenital system infections, and painful haemorrhoids. Sensitivity to treatment may also increase temporarily during menstruation. In these cases, please always consult a doctor or therapist for advice on treatment.

12. ARE THERE AGE RESTRICTIONS FOR TREATMENT? IS PELVICENTER TRAINING ALSO BENEFICIAL AT AN ADVANCED AGE?
There are no age restrictions. Quite the contrary. The training method is offered by a lot of facilities for older people in particular, because of the higher incidence of urinary incontinence. It is consequently not rare to meet patients aged 85 successfully using Pelvic Floor Training Chair training. As age increases, people tend to become less and less agile and may even lose mobility. It is these kinds of cases in particular where PelviCenter training presents an efficient option and has the potential to help people regain some quality of life.

13. IS PELVICENTER TRAINING ONLY AVAILABLE BY REFERRAL?
PelviCenter treatment is a medical physiotherapeutic treatment. As such, it is always only available by referral, regardless of whether it is used as a preventative measure or e.g. just to strengthen muscles. Before referral for PelviCenter therapy, it is very important that patients’ actual symptoms are assessed and any health-related restrictions, in particular potential absolute contraindications, are taken into account.

14. WILL THE TRAINING COSTS BE COVERED BY MY HEALTH INSURANCE?
That depends on the region. Most private health insurers cover a share of the total costs. Unfortunately, the statutory health insurance providers do not currently cover any of the costs.
TESTIMONIALS & REPORTS

by physiotherapist Achim Hillen

- Training as a physiotherapist (Döpfer College Nuremberg)
  Rehabilitation, postoperative aftercare, lymph therapy, geriatrics, orthopaedics, surgery
- OS quantum medicine (therapy development, therapist training)
- Physiotherapeutic support during studies of RPMS therapy
- Ponte Med (therapist training, therapy development)
CASE EXAMPLE
PROPHYLAXIS

- Housewife, 46 years old
- 3 children
- Incontinence complaints for 2 years during sporting activities, lifting, sneezing, tennis, skiing

Even initial treatments produced significantly better sensitisation of the area; the intensities could be increased very quickly and there were no signs of excessive stress. The training went well and the training appointments were kept in an exemplary manner by the patient. However, the patient only realised that an improvement in daily life had taken place following the final discussion with the therapist, namely that no urine had been released during sport activities, in particular during tennis.

This type of success is normal for training with the Pelvic Floor Training Chair. In a very few cases, significant improvement occurs from one training session to the next. In most patients, the problem gradually recedes and subsides in the patient’s life, leaving a secure feeling, allowing the patient to rekindle social contacts. In order to make these changes visible, the therapist should make notes during the introductory consultation. Notes on each training session also provide a good overview of how the training has developed; they also facilitate referrals between therapists and doctors.

CASE EXAMPLE
POSTNATAL

- Office worker, 28 years old
- 2 months after childbirth
- Perineal tear II
- Not physically active

Directly after birth, incontinence complaints were experienced due to a perineal tear and injuries from the birth process.

After initial training in postnatal exercise classes, the patient became aware of pelvic floor training, but was not very confident in it, and only trained sporadically. At the beginning of the training, the patient reported slight incontinence problems, for example when lifting and carrying the child. She hardly carried out active training, as the incontinence problems had resolved themselves to a certain degree, however recovery had now stagnated. Establishing the coil position revealed multiple areas of pain in the pelvic area. Here, the coil was positioned near the area of pain, the frequency was increased and some time elapsed until the patient reported being pain-free. The pains were reported once in the sacral area, and once pronounced pain was experienced in the vaginal area.

After resolving the pain areas, it was possible to determine and record the coil position normally. Further treatment remained pain-free. The patient gained awareness of the pelvic floor and the possibilities of contractions within the first 2-3 sessions and according to her own reports, was able to carry out postnatal exercises in a much more targeted manner. The first training successes were reported after the 3rd treatment. After the 8th treatment session, the patient was nearly complaint-free.

CASE EXAMPLE
PROSTATECTOMY

- Carpenter, 68 years old
- Surgery, 12 prostatectomy with radiation
- Physically active
- Problem: nocturnal bed-wetting, wears pads during the day
- Strongly decreased libido

The patient came for training on the Pelvic Floor Training Chair 2 years after surgery. At the start of training, a stabbing feeling was reported when passing through the pelvic floor during the training of pelvic floor awareness. However, with the described treatment in the first training session, it was possible to loosen the scarred/adhesive tissue, without any further problems.

The patient was very regular with his appointments and quickly noted an increase in libido and slow improvement during the day. He was able to reduce nocturnal visits to the toilet from 4-5 times a night to max. 2 times a night. Through long and intensive training, an acceptable condition was attained and the patient was motivated to continue follow-up treatment. Dependent on the current status, the training could only be conducted on a weekly basis in some cases.

Two setbacks were recorded during the training. Once due to an excessive walk, the other time preparing the garden for winter at very cold temperatures. It was possible to restore the deterioration in condition caused by the physical over-exertion from the walk within 10 days, however, working in cold temperatures caused a longer symptomatic period. In this case, the patient also suffered a pronounced flu-like infection over a longer period, which was unfavourable for the course of training. After complete recovery from the flu-like infection and recommencement of training, the previous improvement was restored.
CASE EXAMPLE

CELLULITE & LIBIDO

- Stewardess
- 32 years old
- 2 children
- Moderately active

The positive effect on the skin tone had been noted in the first patients, however this was seen as a conditional secondary effect. It was only after younger patients started using the Pelvic Floor Training Chair after giving birth, and started to report improved skin, that a few trials with 'before-after' shots were carried out. Colleagues carried out 'long-term' trials and confirmed the results.

The body-shaping effect was achieved with frequencies of 20-25Hz and improvements in the skin with frequencies over 35Hz.

In this manner, a combination training method resulted from the desired training targets, starting with the hyperaemic effect of the Pelvic Floor Training Chair and ending with a strengthening component to preserve the shape.

Positive effects are not only visible in terms of the shape of the pelvis and legs; increased control and sensitivity of the pelvic floor were also perceived. Some female patients reported a significant increase in libido during sex.

CASE EXAMPLE

ERECTILE DYSFUNCTION

Here, 2 different patient types report rapid improvement of symptoms.

Case 1
- Programmer, 35 years old
- Weight-lifter (in recent weeks more intensive training with the leg press)

Case 2
- Taxi driver, 37 years old
- No exercise

Both patients reported erectile dysfunction which had lasted a few weeks. In case 1, the patient was unable to achieve erection, indicating a hypertonic pelvic floor, while case 2 could not maintain an erection due to a hypotonic pelvic floor. In both cases, high frequencies were used to achieve tonus regulation and increased blood circulation in the area.

The training was started and the intensity was adjusted in stages, in a ratio of 1/3 activation/strengthening to 2/3 hyperaemia and micromassage. After the 7th training session, both patients provided very positive feedback regarding the actual problem.

Another issue that should be noted was the condition of the leg muscles, in particular the shortened adductors and ischiocrural muscles. Due to activities carried out in a seated position and the lack of compensatory movements, these areas were highly shortened. By learning the correct stretching exercises, awareness of the interplay between leg, pelvis and pelvic floor muscles could be explained and was directly implemented by the patient – both in daily exercises and a pronounced focus on stretching during sports.

The good patient compliance was the result of the actual issues and the very rapid training successes after 3.5 weeks.

Case 1 took the training for a second period in order to further increase results in weightlifting, without any further complaints.

With case 2, this led to an understanding of creating a balance between daily stretching exercises and sports, and at the very least during the training period, this was integrated into daily activities.
“The therapy has shown great success. Almost all patients experienced significant improvement or complete alleviation of their symptoms.”

DR. MED. UNIV. DARIUS CHOVGHI
Consultant for General Medicine, State-approved Trainer for Sports and Gymnastics, CMI Diploma in Andrology

“The technology is mature and state-of-the-art. Because of its variability, the broad therapeutic range extends from faecal incontinence to post-prostatectomy rehabilitation. The system is therefore a good addition to continence therapy.”

PRIM. UNIV. DOZ. DR. WILHELM HÜBNER
General surgeon & Rectal surgeon/procologist, Surgery & Rectal Clinic, St. Gallen, Switzerland

“This training method is a helpful option, particularly when treating older patients, and especially those with restricted mobility.”

PRIM. DR. EVA MARIA UHER
Head of Pelvic Floor Training in the Vienna Centre, Consultant for Physical Medicine and Rehabilitation, Consultant for Sexual Medicine

“Magnetic field stimulation is extremely well suited to strengthening the body core. It provides an excellent deeply penetrating effect for an effective neuromuscular training.”

UNIV-PROF DDR. WINFRIED MAYR
Prof. for Biomedical Engineering and Rehabilitation Technology at the Medical University of Vienna

“PelviPower (The Pelvic Floor Training Chair) is a safe and effective 21st century evidence based Physiotherapy treatment tool. It greatly aids outcomes for patients with poor pelvic floor muscle function who find it hard to do or adhere to training. Pelvic Floor Muscle problems for patients are awful but the good news is that results are great!”

AOIFE NI Eochaídh
Clinical Specialist Physiotherapist, B.Sc. (Hons), PGd. Cert in Women’s Health, Bon Secours Hospital, Galway, Ireland

“Everyone, not just professional athletes, should make provision early enough for their health in old age. PelviPower (The Pelvic Floor Training Chair) training is easy to use, saves time and yields excellent results in prevention and fitness for your pelvic floor.”

DIRK ULASZEWSKI
Olympian, Seoul 1988 in the men’s 1000m Kayak single, participant in several World Championships and multiple German champion, member of emadeus (German Sporthilfe Foundation club), member of “VSO”

MAGNETIC FIELD STIMULATION IS EXTREMELY WELL SUITED TO STRENGTHENING THE BODY CORE. IT PROVIDES AN EXCELLENT DEEPLY PENETRATING EFFECT FOR AN EFFECTIVE NEUROMUSCULAR TRAINING.”

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Rediscover your younger self

Do you suffer from any of the following post childbirth symptoms?

- Mild to moderate incontinence
- Urinary urgency
- Vaginal laxity
- Pelvic prolapse
- Dryness
- Sexual dysfunction

What is THERMiVa®?
ThermiVa® is a new non-invasive treatment which offers a solution to many of the gynaecology problems associated with childbirth and ageing.

Treatment is fast, painless and involves minimal downtime – all of which means you can expect great results without having to resort to more invasive measures, like surgery.

No anaesthesia is required and the procedure simply involves the use of a small heated wand which is inserted and moved gradually over the specific tissues.

Treatment Plan
An initial consultation* is required followed by a course of 3 ThermiVa® treatments. Annual maintenance treatment is required once a year.

A typical treatment will last around half an hour. Three treatments are recommended however many patients will experience a notable difference after one session.

What our patients have to say....
“The most obvious improvement after my first treatment was that for the first time in decades I have been able to sleep through the night without getting up to use the bathroom at 3am or 4am”

“After having my second baby last year, my pelvic floor muscles were just not the same as they were. I was really nervous about going to the gym. Even a short run was something I had to ‘come prepared for’. But since I’ve had my ThermiVa® treatments I can do my circuit training and squats again, without any worries, or surgery.”

THERMiVa® is now available at

To book your consultation or to find out more information please contact us:

Cosmetech, Maypole Clinic
5-7 Shore Road, Holywood BT18 9XH
Tel 028 9042 3200 | Email frontdesk@cosmetech.co.uk

Cosmetech, Chelsea Private Clinic
The Courtyard, 250 King’s Road, London SW3 5UE
Tel 020 7565 0333 | Email frontdesk@cosmetech.co.uk

www.cosmetech.co.uk

*If you proceed with treatment, your initial consultation fee will be deducted from your final bill.
Cosmetech Maypole Clinic
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