

PROSTATITIS – THE 60 DAY CURE

**Why Most Men Have This Precursor
to BPH and Prostate Cancer
& an Innovative 10-Step Program for Healing**

Larry Clapp, Ph.D., J.D.

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Prostatitis: The 60 Day Cure
Larry Clapp

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The information in this book is presented solely for educational purposes. It is not intended to serve as medical advice or a prescription, or to replace the advice and care of your doctor. Be sure to check with your doctor before beginning any aspect of this program. It is also a good idea to check with your doctor before beginning, altering or ending any health, lifestyle or diet program.

Some respected authorities feel that prostate massage can cause an existing prostate cancer to spread. If you have prostate cancer or an infection of the prostate, check with your doctor before having prostate massage.

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International Prostate Symptom Score (I-PSS) Calculator

The International Prostate Symptom Score (I-PSS) is based on the answers to seven questions concerning urinary symptoms. Each question allows you to choose one of five answers indicating increasing severity of the particular symptom. The answers are assigned points from 0 to 5. The total score can therefore range from 0 to 35 (asymptomatic to very symptomatic).

Select the best answer to each of the seven questions below. When you complete the responses, add your score to compute your total I-PSS and compare to the American Urological Association (AUA) categorization of that score.

0 to 5 0=never, 5=almost always (or 5 times or more where appropriate)

1. Incomplete emptying

Over the last month, how often have you had a sensation of not emptying your bladder completely after you finished urinating?

2. Frequency

Over the past month, how often have you had the urge to urinate again, less than two hours after you finished urinating?

3. Intermittence

Over the past month, how often have you found you stopped and started again several times when you urinated?

4. Urgency

Over the past month, how often have you found it difficult to postpone urination?

5. Weak stream

Over the past month, how often have you had a weak urinary stream? (Please compare to your stream size at age 30.)

6. Straining

Over the past month, how often have you had to push or strain to begin urination?

7. Nocturia

Over the past month, how many times did you most typically get up to urinate from the time you went to bed at night until the time you got up in the morning?

Your Total I-PSS: _____

The AUA Categorization of Your Symptoms:

(Mild: less than 8; Moderate: 8-19; Severe: 20-35)

“This book is a must-read for anyone who has cancer of the prostate or wishes to maintain optimal prostate health. It provides the reader with a road map for the latest cutting-edge technologies in medicine. Dr. Clapp is to be commended for having the courage to seek out 21st Century medicine, and to make it available to all of us.”

— Michael Galitzer, M. D., The American Health Institute

Chapter 1

Why You Should Be Informed about Prostatitis

Why should you care about Prostatitis? Let's start with some basic reasons. If you're a man, you probably have this condition—that is, an inflammation or infection of the Prostate gland—to some degree. And if you're a woman, you may want a better understanding of this pervasive male problem.

It has been my experience that 100% of the men who consult with me *do* have Prostatitis; these men are either seeking techniques to prevent a deterioration of their prostate or are asking for advice regarding symptoms and prostate disorders they have already developed. I've found that they may have Prostatitis on its own or in addition to other prostate ailments. According to a National Institutes of Health (NIH), Prostatitis is actually more common than the two better-known and more widely discussed prostate conditions—Benign Prostatic Hyperplasia (BPH) and Prostate Cancer!¹

For many reasons—including a widespread lack of knowledge about Prostatitis, the inadequacy of the most commonly used diagnostic tools and the fact that many cases occur without identified symptoms—the majority of the Prostatitis cases go undiagnosed and untreated. This is despite the growing evidence that Prostatitis can lead to an enlargement of the prostate (the condition commonly called BPH) which in turn can become Prostate Cancer. Today, Prostate Cancer is believed to be the most common cancer occurring in men.²

Even when Prostatitis *is* diagnosed, existing treatments are often not very successful. Administration of antibiotics is the standard medical protocol, even though (according to the urologists' own statistics) these medications are effective only in less than 30% of cases. Of growing concern is the fact that a long course of antibiotics can actually worsen a man's health. The experience of 45-year-old Robert W. is all too common for men with symptomatic Prostatitis....

In Robert's case, the symptoms began with pain in his lower abdomen and urgent "calls" to urinate. With data from an Expressed Prostatic Secretion (EPS) test, Robert's

¹ *The Prostatitis Syndromes*, Bradley Hennenfent, M.D., p. ix.

² *The Prostatitis Syndromes*, p. 13.

doctor diagnosed his condition as Bacterial Prostatitis. Yet, after taking a series of different antibiotics (four to six weeks with each type) for eight months, Robert could not permanently shake the symptoms. They kept coming back! Finally, his urologist announced they had run out of options with the antibiotic treatment, and Robert would have to learn to live with this condition! After the prolonged course of antibiotics, Robert was left with debilitating side effects—including a weakened immune system, a higher white blood cell count and food allergies. Plus, he appeared to harbor an even worse infection.

As you can see, the consequences of being uninformed about Prostatitis can be quite serious. And there's more. If a weakened state in the prostate progresses to Cancer, radiation or surgical removal of the prostate may be recommended by mainstream medical practitioners. These treatments can result in a reduced quality of life, including incontinence and loss of sexual function! In addition, the Cancer can still reoccur—35% of men who go the route of surgery or radiation require additional treatment within five years.³

In my own life, I learned the hard way about the terrible possible consequences you can face when the early warning signs of deteriorating prostate health are neglected. When I lived in Hawaii, my physician said for years that my prostate was quite enlarged and irregularly shaped. He told me it was “just part of aging.” To my question of “What can I do about it?” he replied that there was nothing that could be done. At one point, I did undergo a biopsy to check for Cancer. The results came back negative. Many years passed with reassurances from my doctor that I was OK. Then, in 1990, came an elevated PSA test result and a subsequent second biopsy. This time, the biopsy confirmed my worst fears—yes, it was the “big C”... Cancer! In response to my questions, the doctor informed me he had delayed taking action until my condition was bad enough and he could cut the prostate out!

Given the limited and unappealing options of surgery and radiation, I began intensive research into other alternatives. With time, independent research and input from an array of health professionals, I was able to develop a treatment for Prostate Cancer that I used to heal myself. I also learned that I had the additional condition of Prostatitis,

³ “Conventional Treatments,” Prostate90 website, http://www.prostate90.com/conven_treat/Default.htm.

which cleared too with my efforts. My approach to healing soon became the subject of my best-selling book, *Prostate Health in 90 Days: without Drugs or Surgery*, which many men have used to defeat Cancer of the prostate.

Despite *Prostate Health in 90 Days'* focus on Prostate Cancer, men with that disease were not the only ones who reported benefits from using the information it contained. I also heard from and worked with men diagnosed with Prostatitis who were able to heal using the ideas I developed. Some of these men participated in the Internet support group, Pralt Discuss, associated with my website, www.prostate90.com.

For instance, Barry J. wrote: *I just finished seven days on Larry's fast and cleanse... and to my surprise, on about Day 6, my Prostatitis symptoms began to disappear. I still-four days after completing the fast-have less frequency, less urgency, a more normal sized [urine] stream and almost no dribbling.* And John R. sent the following e-mail: *Larry's [first] book at a minimum helps Prostatitis... use his book to knock that out so that Cancer does not develop.* And after improving following 16 years with chronic Prostatitis, Bob G. warns: *I've gone through six urologists and two hospitals... Antibiotics were all that the urologists would prescribe. If I don't have an infection and all tests confirm it, then why? Finding a member of the medical profession... who has the patient's interest is a rare occurrence.*

So, my message to you is that it's likely you have Prostatitis and the condition of your prostate will probably get worse. You don't have to take the original course I did—inaction and blind acceptance of a physician's reassurances—a path that is likely to allow the condition to fester. Instead you can spare yourself years of suffering and benefit from the extensive research I have done in prostate health.

About a year ago, I decided to write *Prostatitis: The 60-Day Cure* in order to place the spotlight on Prostatitis so that men with this condition could heal at an early stage. You can be among those men who are able to take advantage of the crucial information presented within the pages of this book. The specific focus here is on Prostatitis, so there's much more discussion about it than in *Prostate Health in 90 Days* which centered on Prostate Cancer.

Even when I was faced with Prostate Cancer, I learned how to save my life. Now it's time to protect your own. A proven way to wipe out Prostatitis is to learn about

nontraditional alternative treatments—and then to use them to heal yourself. This course of action will diminish your chances of developing Prostate Cancer later. Be encouraged by that fact that my healing strategy has worked for thousands of men recovering from prostate problems over the years.

Defeating Prostatitis doesn't have to take the rest of your life. By following my step-by-step program and contacting the inside sources I will list, you can cure yourself in most cases in just 60 days! That's less time than it takes most people to learn to drive or to shop for a house. Isn't your long-term good health, daily quality of life, and continued active sexual life worth the effort?

Prostate Facts & Stats

Prostatitis occurs more often than any other prostate disorder, including BPH and Prostate Cancer.⁴

More than 8 million American men have Prostatitis.

At least 80% of men who have been sexually active have Prostatitis to some degree,⁵ but it is also seen in virgin males.

Many cases are asymptomatic (without symptoms).

This condition can appear anytime in a man's life after puberty, but most often strikes in his 20s, 30s or at retirement age.

Estimates are that 40% of visits to American urologists are for Prostatitis.⁶

As the first prostate disorder to occur in men, Prostatitis should serve as an early warning of possible future problems.

Benign Prostatic Hypertrophy (BPH) affects half of all men over 50, and three-quarters of those over 65.⁷

By age 80, the incidence of BPH is even higher.⁸

Estimates are that 1 in 5 men will get Prostate Cancer,

⁴ *The Prostatitis Syndromes*, p. 1.

⁵ Ronald Wheeler, M.D.

⁶ *Gale Encyclopedia of Medicine*, "Prostatitis," 1999 edition.

⁷ William L. Fischer, *How to Fight Prostate Cancer & Win*, Agora Health Books, 2001.

⁸ Sandra Salmans, *Prostate: Question you have ...Answers you need*, People's Medical Society, 1996.

Compared to 1 in 8 women getting Breast Cancer.⁹

Prostate Cancer is the most common Cancer
Occurring in men today.¹⁰

The death rate for Prostate Cancer is 2 to 3 times higher for African-American men
than for any other ethnic group.

Every three minutes a new case of Prostate Cancer is diagnosed in the U.S.¹¹

Every 15 minutes a man dies from Prostate Cancer.¹²

Rates of Prostate Cancer have increased an astounding 600% since 1985,
the fastest rise seen in any type of cancer.¹³

Disease occurs more frequently in the prostate
than in any other human organ.¹⁴

Prostate 101

Before we delve further into the issue of Prostatitis, let's review some basic information that you should know about your prostate. This complex male sex gland is normally about 20 to 30 centimeters in volume (about the size of a walnut), but in our culture it can enlarge to as much as 50-220 cubic centimeters (as mine did). The prostate sits at the base of your much larger bladder, where it creates slightly alkaline secretions that form part of the seminal fluid. Every day, between one-tenth to two-fifths of a teaspoon of prostatic secretions are produced. When a man is sexually aroused, between 4 to 10 times that amount is secreted by the prostate.

⁹ Atlanta Clinic of Preventive Medicine, <http://www.acpm.net/prostate.html>.

¹⁰ *The Prostatitis Syndromes*, p. 13.

¹¹ *The Prostate: A Guide for Men and the Women Who Love Them*, Patrick Walsh, M.D., and Janet Worthington, Warner Books, Baltimore, MD, 1997.

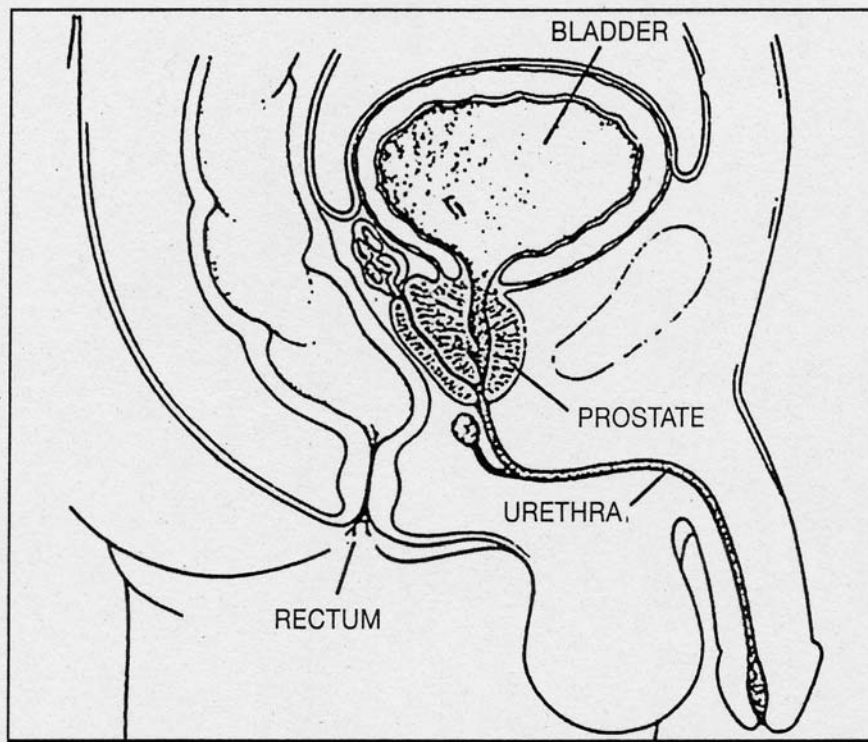
¹² *The Prostate*.

¹³ Atlanta Clinic of Preventive Medicine, <http://www.acpm.net/prostate.html>.

¹⁴ *The Prostatitis Syndromes*, p. 2.

THE PROSTATE

What It Is and What It Does

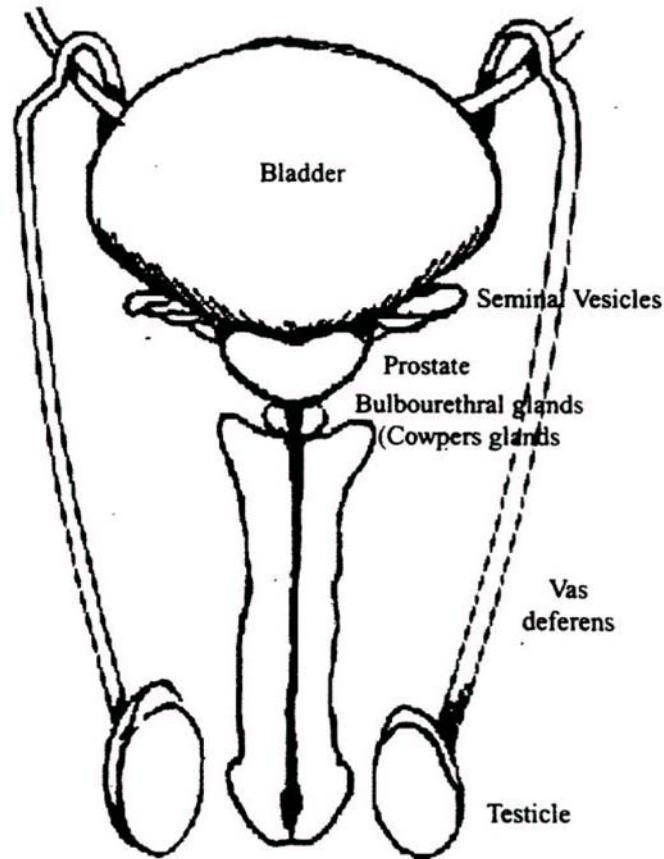


The prostate and the urinary tract share an outlet to the outside world, a tube known as the urethra—the reason that urine and semen come from the same opening at the end of the penis. Because this tube passes directly through the “doughnut hole” in the center of the prostate gland, enlargement of the gland can narrow the exit tube—thus causing the urinary problems familiar to so many men.

From *Prostate Problems*, by Charles E. Shapiro, M.D., and Kathleen Doheny, Dell Surgical Library.

Seminal fluid is the liquid portion of the semen that is discharged during orgasm. In seminal fluid, prostatic fluid is mixed with additional secretions from the two seminal vesicles (located one to either side of the prostate) and the testicles. One of the roles of prostatic fluid is to provide nourishment to the fragile sperm to keep it healthy and active as it moves to the ovum.

Two nearby smaller glands, referred to as the Cowper’s or bulbourethral glands, also issue secretions during sex. These secretions may serve as lubricants.



A main purpose of the urethra tubing is to carry urine from the bladder through the prostate and out of the tip of the penis. The prostate surrounds the urethra. Fluids from the prostate are also transported through the urethra pathway. Because of its location and use of the urethra, an unhealthy prostate will likely contribute to a man having urinary problems. Conversely, the immune defenses of a proper functioning prostate help prevent bacteria from traveling onward up the urethra onto the bladder.

Sperm is shot out of the body with help from muscle contractions of the prostate. One of the prostate's jobs is to pump the sperm out of the body with enough power to reach a woman's ovum. This means the prostate functions as both a gland and a muscle.

There are many reasons why the prostate's state of health can directly affect the quality of a man's sex life. In addition to the factors mentioned above, blood that flows

through the prostate is involved in creating erections. Important nerves linked to pleasurable sensations in sex pass through or around this gland too.

Finally, the emotional center of a man's sexuality is also located in the prostate. Feelings of sexual pleasure, disappointment, stress, inadequacy, immorality, hate and dislike are all stored in this gland. Unreleased negative emotions thus can contribute to prostate problems.

What Is Prostatitis?

As you've learned, Prostatitis refers to an inflammation and/or infection of the prostate, an important male gland. The prostatic inflammation/infection can be brief and mild, sudden and considerable, or long-lasting and chronic. Many cases of Prostatitis are asymptomatic, i.e. without recognized associated symptoms. However, rarer "acute Prostatitis" presents sudden severe symptoms, including pain and tenderness in the pelvic region (in the area where the prostate is located), pain in the penis and testicles, an urgent need to urinate, blocked urination, weak erections, fatigue, fever and chills.

In acute cases, Prostatitis symptoms may be so disruptive they can restrict a man's ability to sit comfortably, drive, hold a job, be in a relationship or have an erection. Acute symptoms may plague men who are only in their 20s and 30s. Without successful treatment these men live miserable lives.

Often the typical symptoms of chronic Prostatitis are attributed to aging. These are similar to those found in acute cases, but they may be milder. The symptoms include nocturia (the need to get up to urinate several times during the night); pain, hesitation or urgency in urination; and/or difficulty maintaining erections. Other problems may be pain in the lower back, testicles, perineum (area between the testicles and anus), lower abdomen, rectal area or during urination or ejaculation. A man may also notice a hardened discharge on the tip of the penis upon awakening, brownish or yellowish secretions during the day and an itchy feeling inside the penis. Eventually, restricted urination may lead to recommendations for catheterization or surgery to open up the urinary passage through the center of the prostate.

Below, typical Prostatitis symptoms are listed for your easy review. In the **Appendix I**, we have also included the NIH Chronic Prostatitis Symptom Index, another tool for comparing your symptoms to those commonly associated with this condition.

Symptoms of Prostatitis

Pain, hesitancy or urgency in urination
Nocturia (getting up several times at night to urinate)
Incomplete voiding
Decreased force of the urinary stream
Burning feeling with urination
Lower back pain
Pain during sex and/or ejaculation
Discomfort in the groin area, penis or testicles
An itchy feeling in the penis
Discharges at the tip of the penis
Blood in urine
Fever of 102° or above (in acute cases)
Flu-like symptoms (in acute cases)
Erection difficulties/impotence
Premature ejaculation
Male infertility
Fatigue
Depression
Decrease in sexual desire

Prostatitis has been called “the waste basket of clinical ignorance” by urologist Thomas Stamey, M.D., of Stanford University because of the current sad state of diagnosis and treatment in standard medicine.¹⁵ Part of the problem is that all the possible causes of Prostatitis have not been completely investigated through scientific methods. It seems obvious, however, that a man with Prostatitis often has multiple causes operating

¹⁵ Article “Chronic Prostatitis Affects Everyone” by Ronald Wheeler, M.D., p. 1.

all at one time. These factors can include bacteria, yeast, viruses, parasites and STD organisms, along with lifestyle issues such as stress, diet, lack of exercise, sexual conflicts, etc.

Many urologists believe that when a man makes unprotected love, he is exposed to bacteria, yeast, viruses and parasites that are foreign to his prostate. He may come in contact with organisms associated with such STDs as Chlamydia, Gonorrhea, Syphilis, HIV, Herpes, Cytomegalovirus (CMV), etc. (The man's state of health may determine whether he has an actual STD breakout.) The more women that a man has sex with, the more varieties of microorganisms he will encounter. These organisms can accumulate in the prostate over the years and can contribute to the condition of Chronic Prostatitis. This theory correlates with many studies that have shown that the more women a man has been with sexually, the more likely he is to develop Prostate Cancer.

It is my belief that, in these modern times, microorganisms are coming in contact with human prostates that are weakened by a variety of toxins in the diet and environment. (This is why cleansing the body and fasting are integral parts of my program.) It appears the accumulation of different strains of organisms is more than a weakened prostate can handle. Thus it becomes inflamed and enlarged. Women are also weakened by toxic factors; hence they also host a wider range of organisms. In unprotected sex, whatever is going within the woman will end up in the man, and visa versa.

Many men recall a lovemaking after which prostate problems began, particularly when they were drunk during sex. A prostate already weakened and irritated by alcohol often becomes inflamed and/or infected during intensive lovemaking. During my tenure as Executive Officer of a destroyer, I noted an old Naval saying that proved to be very true, "A drunk sailor who screws his brains out will have the drip in two to three days".

There is still much that is not known about the causes of Prostatitis. However, recent research indicates that many problems in Prostatitis are associated with blockages in this gland caused by current or earlier infections. This is a promising area for both treatment and further understanding of this illusive condition. You'll find more information on this particular subject throughout the book.

Prostatitis & Prostate Cancer

While the link between chronic Prostatitis and Prostate Cancer seems obvious to some, those in standard medicine can be reluctant to confirm it definitively or may deny that there is a connection at all. Yet, chronic inflammation of other organs is commonly associated with various cancers. One needs only to look at the connection between Hepatitis and Liver Cancer, inflammation of the lower esophagus and Esophageal Cancer and Ulcerative Colitis and Colon Cancer to see this phenomenon in action. **The truth is Prostatitis is *always* found in conjunction with Prostate Cancer.**

Evidence of the relationship between these two maladies can be seen when surgically removed prostates or biopsied prostate tissue are examined. In 1979, Drs. Kohnen and Drach found that 98% of surgically removed prostates showed signs of inflammation. Urologist Timothy Moon, of the University of Wisconsin, and others report that 100% of the surgical and biopsied specimens they have examined, indicate the existence of Prostatitis.¹⁶

Prostatitis & Benign Prostatic Hypertrophy (BPH)

Remember, I wrote that my prostate had been enlarged for years before I was diagnosed with Prostate Cancer? Well, the technical term for an enlargement of the prostate is Benign Prostatic Hypertrophy or BPH. Sometimes this swelling of the prostate does not lead to Cancer, but often Prostate Cancer is preceded by BPH. And BPH may be the result of Prostatitis.

One of the major problems with BPH is that prostate enlargement can eventually interfere with the flow of urine through the urethra, resulting in the man not being able to completely empty his bladder. Sometimes the enlargement grows toward the outer sides and does not compromise the urethra as much.

Ironically, it seems that men with identical symptoms may be diagnosed with either Prostatitis or BPH—the difference is sometimes only the man's age. In these cases, men under 50 tend to be told they have Prostatitis, whereas those over 50 receive a diagnosis of BPH.¹⁷ I believe this is because Prostatitis is actually a precursor (preceding

¹⁶ Article, "Chronic Prostatitis Affects Everyone," p. 5.

¹⁷ sci.med.prostate.prostatitis FAQ, Part 1.

condition) to BPH. Looking over the symptoms of BPH, it is easy to see how much they overlap with those associated with Prostatitis. Symptoms for BPH include hesitancy in urination, frequent urination, nocturia (getting up several times at night to urinate), urgency to urinate, straining to start a urine stream, a weak stream, stopping and starting the urine and dribbling of urine before and after urination. Additional problems may be incomplete emptying of the bladder and incontinence.

It has been estimated half of all men have BPH by the age of 60, and that 90% will suffer from it by age 85. Isn't it time to start curbing these numbers? Two logical approaches would be to deal with Prostatitis properly before it advances to BPH and to treat Prostatitis in cases of BPH.

What You Can Do

Prostatitis has not received the medical research it deserves. While several major prostate studies are now underway, their findings will take time. Meanwhile many physicians lack information about what treatment is really effective for Prostatitis, reacting automatically with the administration of antibiotics. Remember, by the urologists' own calculations, these medications are only effective for less than 30% of patients. This leaves at least 70% of patients still with the condition of Prostatitis, plus there is reoccurrence within that 30%.

Though most of us may wish to simply take a pill or supplement and then go on with our business, I think we're also realizing that this often isn't possible. While supplements and sometimes antibiotics can prove very helpful, healing your prostate is likely to require more. The good news is that I have already done much of the groundwork for you. *Prostatitis—The 60-Day Cure* lays the answers before you as part of an easy-to-follow 10-step program. I know these steps work because they worked for my own Prostatitis. I also talk to men every day with this condition who are using my approach for successful healing.

So, keep reading and begin to take action to protect your health and quality of life. Don't leave the fate of your prostate, sex life, relationships and physical health in the hands of physicians still searching for answers. Prostatitis is an early warning that

changes need to be made. With the help of *Prostatitis—The 60-Day Cure*, you can begin to take positive steps to a healthier and happier future.

How This Book Is Organized

In this first chapter you have discovered some of the reasons Prostatitis is at epidemic proportions in the U.S. today. You have also learned that there can be terrible consequences if this condition is not effectively treated. However, you are also discovering there are steps you can take to heal. Keeping the significance of prostate education in mind, let's consider what is ahead in *Prostatitis: The 60-Day Cure*.

In the remainder of **Part I, “Prostatitis, An Early Warning You Don’t Want to Ignore,”** we will explore:

- How to assess your state of health to determine whether Prostatitis is a problem for you (though it is best to assume that you do have some degree of this condition).
- The standard diagnostics you are likely to be offered (which are not very effective) and other approaches that work well.
- The medical treatments that standard medicine is currently using and why they often do not work.
- The problems associated with the prolonged use of antibiotics.
- The promising emerging options for Prostatitis treatment, all of which are incorporated into the book’s highly effective 10-step healing program.

In **Part II, “The 60-Day Cure,”** you will become acquainted with the 10-step plan. These steps include:

- **Step 1 – Fasting and Cleansing for Prostate Health**
- **Step 2 – Upgrading Your Dental Health to Support Your Healing and Well-Being**
- **Step 3 – Choosing Supplements & Herbal Remedies that Work**
- **Step 4 – Better Nutrition: Eating Right for Your Body & Prostate**
- **Step 5 – Adding Prostate Massage, Massage Therapy & Lymphatic Stimulation to Further Your Healing**

- **Step 6 – Using Prostate Drainage to Clear Resistant Blockages & Those Hidden Infections**
- **Steps 7-9 – Three More Techniques for Healing: Stress Management, Exercise & Personal Growth**
- **Step 10 – Adding More Passion, Mutual Pleasure & Spiritual Depth to Your Love Life**

In **Part III, Putting It All Together**. You will learn how to do just that.

The final chapter will present “Your Personal Healing Workbook,” showing you how to place the pieces of your recovery puzzle into a workable plan.

Yes, finally, a comprehensive program to diagnose and cure Prostatitis is available, and it is right in your hands in the form of this book, *Prostatitis: The 60-Day Cure*. It is my hope that this book will improve the quality of many men’s lives, as well as limit and prevent rampant prostate deterioration and its associated complications.

Looking Ahead to Chapter 2

In the next chapter, “Diagnosis? In Many Cases, Difficult,” we will discuss the diagnostic approaches most commonly used today, and why they often fall short of offering the best information. You will also learn of better alternatives, including the *Expressed Prostatic Secretion (EPS) test* which is rarely done by most urologists. In addition, you will learn of the many microorganisms that can be involved in this challenging condition known as Prostatitis.