

THE IRON FLOOR

Find the muscle. Learn the safety switch. Do day one.

A one-page start guide from the book **The Iron Floor** by James Iron · Casswell & Grey

Most men who try pelvic floor exercises train the wrong muscle, skip the release, and quietly give up. This page fixes that. Three steps, ten minutes, no equipment. If it works for you — and you are likely to feel the first sign within a few weeks — the full 8-week programme is in the book.

01 FIND THE MUSCLE — THE MIRROR TEST

Stand naked in front of a mirror, flaccid. Try to make the base of your penis draw back into your body — the cue is *shorten the penis*, or *pull the testicles up towards the belly button*.

You've found it if: the testicles lift and the shaft gives a small upward bob, hands-free. That penile bob is the clearest sign you can get at home that you are firing the right muscle — the anterior pelvic floor. No glute-clench, ab-brace or strain can fake it.

You've missed it if: your stomach pushes out. That is bearing down — the wrong direction. Reduce the effort to about 20% and try the cue again.

One-time location check (not an exercise): next time you urinate, stop the flow mid-stream using only your pelvic muscles. Feel that lift behind the scrotum — that's the muscle. Do this **once** to locate the sensation, never as training: repeatedly interrupting your stream can cause urinary problems.

02 THE SAFETY SWITCH — DON'T SKIP THIS

A tight muscle is not a strong muscle. Squeeze only, never release, and you build a pelvic floor locked in permanent tension — which is linked with pain and can make premature ejaculation *worse*. So you learn to release before you strengthen.

How to Reverse Kegel:

1. Inhale deeply into your belly — chest still, stomach expands.
2. As you inhale, gently push your pelvic floor **down and out**.
3. The feeling is the moment just before you urinate, or gently releasing gas. Subtle, not forced — like unclenching a fist.

The rule: 3 slow Reverse Kegel breaths after every exercise, and 1 minute to close the session. It is half the programme.

03 DO DAY ONE — PHASE 1, THE LYING-DOWN SESSION

No gym, no equipment. Lie on your back — gravity is neutral, so the muscle is easiest to isolate. Run this twice a day.

EXERCISE	WHAT TO DO	REPS
The Pulse	Squeeze to 100%. Release immediately and fully.	10 reps
The Long Hold	Squeeze to 50%. Hold 5s. Relax 5s.	10 reps
Reverse Kegel	Deep belly breathing. Feel the floor drop and expand.	1 min

Self-check: one hand on your stomach. If your abs move during a rep, it doesn't count — reset, drop to 20–30% effort, isolate the floor, go again. A quiet, accurate contraction beats a forceful one that recruits your whole torso. **One daily habit to start now:** stop "power peeing." Don't strain to force the flow — let it come at its own pace. Every trip to the toilet is a chance to practise *not* bearing down.

⚠ STOP, AND SWITCH TO REVERSE KEGELS ONLY, IF YOU GET:

pain in the perineum or tailbone · difficulty starting your urine stream · premature ejaculation getting worse. That is overtraining, not undertraining — the answer is less, not more. Rest with Reverse Kegels only for a week before any more strengthening. See a pelvic floor physiotherapist if you have pain that worsens with exercise, blood in your urine or semen (never normal), or a history of pelvic surgery.

WHAT HAPPENS NEXT

This is the first two weeks, lying down. The full programme progresses to seated, then standing — eight weeks, ten minutes a day — and covers ejaculatory control, the troubleshooting most men need, and how to keep the gains for life.

Get the book: *The Iron Floor*, the complete 8-week protocol, on Amazon.

UK: amazon.co.uk/dp/B0HBMWZ39FC · US: amazon.com/dp/B0HBMWZ39FC

More, and the book's sources: theironfloor.com

Educational and informational only. This is not medical advice and is not a substitute for diagnosis or treatment. Consult a qualified healthcare provider before starting any exercise programme, especially if you have existing pelvic, urological, cardiovascular or neurological conditions. The exercises carry a low risk of injury when done correctly; if you experience pain, bleeding or worsening symptoms, stop immediately and seek medical advice. This programme may complement, but does not replace, medical care.