

## PATIENT INFORMATION

# Vaginismus

### Introduction

Vaginismus is when the muscles around the vagina tighten (contract) against your will or without you realising (involuntary), causing the entrance to the vagina to spasm causing pain. It is a psychological problem that shows itself in a physical way and is fairly common, especially in women in their late teens to thirties.

The vaginal muscles go into spasm, usually in response to the vagina or vulva being touched before sex. It can also happen if penetration of the vagina by the penis (sexual intercourse) is attempted, or during a gynaecological examination. Some women find that they cannot use tampons when they have a period (menstruate).

Vaginismus can cause distress and relationship problems. It can also create problems when it comes to starting a family. It is untrue that women who have vaginismus don't like or want to have sex. Many women with this condition enjoy the closeness and share sexual pleasure with their partner. They are able to achieve orgasm during masturbation, through foreplay and oral sex. It is only when sexual intercourse is suggested or attempted that the vagina tightens to prevent penetration.

### Symptoms

There are several symptoms of vaginismus including:

- Involuntary spasm of the muscles in the vagina
- Fear of pain or real pain
- Intense fear of penetration
- Loss of sexual desire if penetration is attempted and
- Pain if penetrated by a tampon, finger or penis.

## **Causes**

There are many factors that cause vaginismus and is not always full understood why the condition happens.

Some women have had the condition all their adult lives and may never have had sex because of it. With others, it may due to the physical or emotional trauma of a difficult childbirth or sexual encounter. Vaginismus may occur even if women have had a previous sexual history of enjoyable and painless sex. In some cases, vaginismus can occur after a vaginal infection, the after effects of childbirth, tiredness and depression. Other physical causes include injury of inflammation of the vagina, pelvis or bladder. It may be because of persistent vaginal dryness or irritation due to spermicides or latex (rubber) in condoms. Even if the original physical cause has disappeared, vaginismus can still continue to happen. It can also be a side effect of alcohol, medication or drugs.

Other factors may be experiencing a past or recent trauma to the genital area or an incident linked to sexuality can make your body respond in a protective way to stop further hurt. A clumsy, painful sexual encounter or examination may be the root of the problem. The fear that the vagina is too small for sexual intercourse may be linked to unpleasant sexual experiences at a young age or at the time of the first sexual experience. For some women, vaginismus may be the result of being sexually abused, assaulted or raped.

A very strict upbringing where sex was never discussed, or unhelpful messages leading to feelings of guilt and shame can be another cause. Inadequate sex education, being told sex is painful or sexual desire is wrong can cause fear and anxiety of sex. Religious or cultural taboos or the fear of getting pregnant can also contribute to vaginismus. Relationship problems can also be a factor.

## **Diagnosis and Treatment**

Diagnosis is based on the woman's medical history, the symptoms and a physical examination, if possible. Any physical disorders that may be causing or contributing to vaginismus will need to be treated for example, an injury or infection. However, if the cause of the condition is psychological, then counselling for the woman, with or without a partner, is a possible option. Alternatively you may prefer self-help techniques. This involves getting to know your own body, possibly with an understanding partner and/or the help of a health professional.

You can be taught a technique to relax the muscle spasms in the vagina. It involves gradually widening (dilating) the vagina with a set of vaginal trainers. These are four smooth, penis shaped cones that gradually increase in size and length.

Insert the smallest one first and use a lubricant to help if you want to. Go at your own pace and make sure you are relaxed before trying. Once you feel comfortable inserting the smallest one, move onto the second size, and so on. It doesn't matter how long it takes you to do this, whether its days, weeks, months. Just do whatever you feel comfortable with so you can confidence and feel more in control of your own body. When you get to the stage where you can tolerate the larger cones without feeling anxious or any pain, they you may want to try having sex.

If you don't think that the cone method is right for you, take the time and get to know your own body. Take a warm, relaxing bath and lie somewhere comfortable. When you feel ready, touch yourself around the vaginal area. If you feel yourself tensing up, stop and take a moment to slow your breathing down. Relax and try again. Do this for a few days before you move onto the next stage. If you feel comfortable touching yourself, try to put your finger very gently inside your vagina. If you are ready, over the next few days, gently push your finger further inside and feel around. You will find that your vagina is very flexible and supple.

If you have reached this stage, try putting a tampon inside. Put some lubricant on the tampon so it will be easier to insert. If you have a supportive partner, ask them to help you with each stage. Spend time with your partner being sensual. Explore each other's bodies through touch and massage.

When you are relaxed enough to attempt intercourse, make sure you are fully aroused before attempting penetration. Remember to take things slowly and gently.

Based on Health Encyclopaedia. NHS Direct

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