What is Vaginismus?

Vaginismus is a condition that can affect a woman’s ability to tolerate vaginal penetration. Penetration of any kind may be difficult, painful or impossible. The term vaginismus refers to an involuntary contraction or spasm of the muscles in the pelvic floor and surrounding the entrance to the vagina in response to attempted penetration. Sometimes the spasms can occur at just the thought of penetration.

Vaginismus doesn’t necessarily affect your ability to get aroused or enjoy sexual activity other than penetration.

Primary Vaginismus: This refers to a situation in which no form of vaginal penetration has ever been possible. It may be detected when first trying to use tampons, or first having penetrative sex.

Secondary Vaginismus: This refers to a situation in which pain-free penetration has been achieved previously and refers to a development of vaginismus symptoms at a later date.

Signs of Vaginismus can include:

- Difficulty inserting a tampon
- Burning or stinging pain with vaginal penetration
- Difficulty achieving vaginal penetration
- Feeling that there is a block preventing vaginal penetration
- Discomfort and difficulty when having a vaginal examination or smear test
- Anxiety around penetrative sex/vaginal penetration

What Causes Vaginismus?

The causes of vaginismus are not always obvious. There can be a mixture of biological, social, cultural and psychological factors involved, for example:

- An underlying physical condition such as thrush, an infection or a skin condition may trigger pain during sex and over time this might lead to the development of vaginismus.
- Beliefs, anxieties or fears surrounding sex may play a part. A fear of penetration, a belief that it will be painful or a fear of sexually transmitted infection or pregnancy may lead to vaginismus symptoms.
- Some women may develop vaginismus as a result of a negative experience, for example sexual assault, unwanted sex, or a bad/painful experience during a medical examination.
- Some social and cultural messages about penetrative sex may also contribute to the development of vaginismus.

*It isn’t always completely clear-cut and you may not be able to identify the exact cause of your symptoms.*

Symptoms of vaginismus can persist for a significant length of time if not treated, even if you actively wish to engage in penetrative activities and even if you had an infection that has now resolved. The muscle spasms are an involuntary reflex response aimed at protecting you from anticipated discomfort - they are not under your conscious control.

Any form of anxiety around penetration can cause the pelvic floor muscles to contract and tighten, making penetration more difficult and in some cases uncomfortable or impossible. This can become a vicious circle in which you anticipate discomfort and your pelvic floor muscles respond by tightening and preventing penetration.

**Can Vaginismus be treated?**

Yes – vaginismus can be treated. If you think you may have vaginismus you should visit your GP. They may need to do a vaginal examination to rule out infection or any other contributing factors. Depending on the likely causes of your symptoms, your GP may refer you for physiotherapy and/or psychosexual therapy. Both of these can help with your symptoms.

**How is Vaginismus Treated?**

Treatment usually focuses on managing your feelings around vaginal penetration and exercises to gradually get you used to vaginal penetration.

Treatments **may** include

- Mindfulness, breathing techniques, and gentle touch exercises to help you relax your pelvic floor muscles
- Pelvic floor release exercises to help you improve your control of the muscles
• Sensate focus – progressive exercises you can work on with your partner to help you relax during sexual activity
• Vaginal trainers – smooth, tampon-shaped devices of progressive sizes to help you become used to having things inserted into the vagina
• Psychosexual therapy – talking therapy that can help you understand and manage your feelings and thoughts about your body and sex

What Can I Do to Help Ease my Symptoms?

• It is a good idea to stop the activity that is triggering the vaginismus until you have undergone a course of treatment. Continuing with penetrative sex or using tampons for example, when experiencing vaginismus, can exacerbate the symptoms and be detrimental to your progress
• If you think you may have an infection or thrush then go and see your GP
• Look after your vulva (the external, visible part of the female genitalia)
  o Avoid using soap/scented bath products/feminine care products on your vulva
  o Wash the vulva with water or try an emollient such as Epaderm or Hydromol
  o Wear loose fitting cotton or silk underwear
  o Try an emollient as a protective, soothing barrier cream (but not a nappy rash cream such as Sudocrem)
  o Only wash your vulva once a day – pat dry gently afterwards with a clean towel
• If you notice any changes to the vulval skin, go and see your GP
• If you think you are experiencing menopausal-related changes and discomfort to the vulva, such as itching, dryness or frequent urinary tract infections, visit your GP

This document is available in Welsh / Mae’r ddogfen hon ar gael yn Gymraeg