KEGELS

The Kegel exercise is designed to tone the pelvic floor, a group of muscles including the pubococcygeus muscle, known collectively as the levator ani. Dr. Arnold Kegel first described this muscle's importance in 1948, and it has since routinely been referred to simply as the Kegel muscle.

Poor tone of the Kegel muscle can cause incontinence (leaking urine when coughing, sneezing or laughing), discomfort, lack of sensation during lovemaking, unusual pain during childbirth, premature flexion of baby's head, prolonged second stage, damage to muscle, and feelings of pressure. On the other hand, a strong Kegel muscle provides good urinary control, and assists in sexual pleasure including orgasm and a tight vagina. Pediatricians even advise it for children who suffer from bed wetting.

Childbirth When the circular muscles of the Kegel muscle are tightened, they tend to draw the vagina upward and closed. When relaxed, the vagina descends downward and open. The ability to control this muscle can assist with childbirth by consciously being able to relax this muscle during second stage pushing. A woman who holds back by tightening this muscle for fear she might release urine or fecal matter is also holding back her baby, and instead of pushing the baby down and out is merely playing tug-of-war with her own sets of muscles and is ineffectually squeezing the baby and causing herself a lot of unnecessary pain. You should deliberately become aware of the difference between tightening and loosening of this muscle so that you can deliberately welcome your baby smoothly.

After Childbirth To even consider tightening the Kegel muscle after the birth of the baby often brings on the response, "you've got to be kidding." But, you should start as soon after birth as possible to tighten the muscle, even if it's just with very gentle pressure. The reason for this is that, after birth, the abdominal muscles are stretched from carrying the baby, and the Kegel muscle is stretched having the baby. Everything is very 'open' and weak. Not exercising and tightening can allow them to heal in the 'open' position, making that muscle weak for the next delivery. It is important after the pregnancy and birth that these two sets of muscles be actively exercised to draw them back into their original shape and ability to function. Keeping this muscle in good flexible condition during pregnancy allows your body to return to normal function sooner and easier after your baby is born. Just begin as soon as you can and start slowly.

Lovemaking The tissues of the vaginal walls actually have little sensation. Some of the wife's sensations during lovemaking comes from pressure exerted on the inserted penis by her tightening this inner muscle layer which is just beneath the surface of the vaginal walls. At a certain point of sexual excitement the muscle may begin to contract rhythmically and automatically of its own accord. A tight, toned Kegel muscle can improve this rhythmic contracting and thus your ability to achieve orgasm. Men who exercise this muscle may find they are able to extend lovemaking by consciously withholding ejaculation.

Performing the Kegel It is important to learn how to perform the Kegel properly to make the exercise as effective as possible. You can learn just where this muscle is by inserting your finger into the vagina and trying to tighten the vagina around your finger, or by attempting to stop the flow of urine during urination. However exercises should not be performed on a regular basis during urination, as this may increase the chances of urinary tract infection.

The muscles should be tightened progressively, layer by layer, in an attempt to exercise each muscle of the levator ani as individually as possible, and then released slowly. Think of it as drawing your vagina slowly up an elevator, floor by floor, holding at the top floor for five seconds, then slowly going back down to the bottom floor-all the way to the basement. Exercises should take place in cycles of 15-25, four times a day.

You can also perform this exercise by sitting on the edge of a chair and slowly drawing your vulva up, up, until it is no longer touching the chair. Then gradually release the pelvic muscles until the vulva is again resting on the chair edge. You can also try to stop the flow of urine when on the toilet, placing your legs far apart and contracting these muscles so that only about a teaspoonful of urine is released at a time. If you cannot control urine flow in this way, your Kegel muscle is weak and needs to be strengthened through routine exercise.

You may perform this exercise anywhere, in public, at stoplights, etc., and no one will be the wiser. My husband configured my computer so that about every 10 minutes, my computer would say, "Kegel! Kegel!" all day long! He knew how much I was chatting online and checking email, and knew I would always hear it!

Kegel devices A pelvic cone, also known as vaginal cone, is used to purportedly strengthen the Kegel muscle. Similar to a small tampon, cones contain graduated weights that require a stronger and stronger Kegel muscle to retain the cone in the vagina. There is also a device known as the Kegelmaster and another called the KegelPro. These devices are designed to provide resistance to the Kegel muscle, thereby increasing the effectiveness of the exercise. It is unnecessary to use any type of device to strengthen the pubococcygeus muscle as research indicates that simply performing the Kegel exercise, without cones, weights, resistance devices, is still more effective. Kegels are much easier to perform with no side effects.

References

Holistic Midwifery, Volume I, by Anne Frye; p169, 264-265. Under the Apple Tree, by Helen Wessel; p54-55. Husband-Coached Childbirth, by Robert Bradley; p95