



# Vaginismus

## What is vaginismus?

Vaginismus is when your pelvic floor muscles involuntarily tighten. These muscles are in the lower third of the vagina. This can happen before or during an attempt to insert something into the vagina. For example, before or during sex, when inserting a tampon or sex toy, or during a vaginal examination.

There are two types of vaginismus:

- Primary – where vaginal penetration has never been achieved.
- Secondary – where vaginal penetration was possible but is no longer possible for different reasons.

## Signs and symptoms

The main sign of vaginismus is the involuntary tightening of your vaginal muscles (part of your pelvic floor muscles). This can cause symptoms of pain and discomfort with any attempted vaginal penetration.

## Causes

Vaginismus can occur for many reasons. It may be associated with physical factors, such as:

- medical conditions (e.g. recurrent urinary tract infections (UTIs), thrush, persistent pain syndromes, endometriosis)
- Sexually transmitted infections (STIs) and ongoing pain after an STI has been treated
- vulval skin conditions (e.g. lichen sclerosus)
- vulval pain, including changes to the vulval skin and lining of the vagina which happens at menopause.

Psychological factors may play a role.

For example, fear due to trauma during childbirth or surgery, or negative messages about sex.

Fear may also be due to previous experience of:

- painful vaginal examinations
- painful sex
- sexual assault or rape.

Other psychological factors might include:

- anxiety
- depression
- relationship problems
- feeling self-conscious
- fear of intimacy
- fear of pregnancy
- lack of arousal.

Vaginismus can cause some women to avoid situations where attempts at vaginal penetration might occur (e.g. dating, sex, pelvic examinations). Past experiences of pain can set up a cycle of fear of pain and muscle contraction.

## Diagnosis

Vaginismus is usually diagnosed via a clinical examination. During your first visit, your doctor will ask about your symptoms and medical, family and sexual history. They may also ask about sexual trauma and abuse. If your doctor suspects vaginismus, they may ask if it's okay to do a gentle physical examination – although this may not be possible.

## Treatment and management

Your doctor or specialist will recommend different treatment options depending on your individual situation. Common treatments include:

- pelvic floor physiotherapy (e.g. pelvic floor muscle relaxation exercises, gentle massage, equipment such as biofeedback and vaginal trainers)
- counselling or therapy
- medication to help with any persistent pain issues.

### When to see your doctor

If you have any concerns with your vulva or vagina, it's important to see to your doctor. Treatment for vaginismus may involve different health professionals, such as:

- a doctor
- a pelvic floor physiotherapist
- a psychologist
- a sex therapist.

**For more information, resources and references visit [jeanhailes.org.au/health-a-z/vulva-vagina](https://jeanhailes.org.au/health-a-z/vulva-vagina)**



Phone 03 9453 8999  
[jeanhailes.org.au](https://jeanhailes.org.au)

Jean Hailes for Women's Health gratefully acknowledges the support of the Australian Government.

Updated May 2023

Disclaimer: This information does not replace medical advice. If you are worried about your health, talk to your doctor or healthcare team.

We write health information for people with diverse backgrounds, experiences and identities. We use the term 'women', but we acknowledge that this term is not inclusive of all people who may use our content.

© Jean Hailes for Women's Health 2023