

# Perineal Massage

**Excerpt from The Birth Book By William and Martha Sears**

The better you prepare your perineal tissues for the stretching of birth, the less they will tear, and the better they will heal. Like training muscles to perform at their best in an athletic event, conditioning the tissues around the vaginal opening with massage prepares the perineum to perform. Midwives report that women who practice perineal massage daily in the last six weeks of pregnancy experience less stinging sensation during crowning. Mothers with a more conditioned perineum are less likely to tear or get an episiotomy. An added value of perineal massage is that it familiarizes a woman with stretching sensations in this area so she will more easily relax these stretching muscles when stinging occurs just before the moment of birth.

Try this technique:

- Scrub your hands and trim your thumb nails. Sit in a warm comfortable area, spreading your legs apart in a semi-sitting birthing position. To become familiar with your perineal area use a mirror for the first few massages (a floor-to-ceiling mirror works best). Use massage oil, such as pure vegetable oil, or a water-soluble lubricant, such as K-Y Jelly (not a petroleum-based oil) on your fingers and thumbs and around your perineum.
- Insert your thumbs as deeply as you can inside your vagina and spread your legs. Press the perineal area down toward the rectum and toward the sides. Gently continue to stretch this opening until you feel a slight burn or tingling.
- Hold this stretch until the tingling subsides and gently massage the lower part of the vaginal canal back and forth.
- While massaging, hook your thumbs onto the sides of the vaginal canal and gently pull these tissues forward, as your baby's head will do during delivery.
- Finally, massage the tissues between the thumb and forefinger back and forth for about a minute.
- Being too vigorous could cause bruising or swelling in these sensitive tissues. During the massage avoid pressure on the urethra as this could induce irritation or infection.
- As you become adept with this procedure, add [Kegel exercises](#) to your routine to help you get the feel for your pelvic muscles. Do this ritual daily beginning around week 34 of pregnancy.
- Discuss the value of perineal massage with your birth attendant.

## Research on Prenatal Perineal Massage

Labrecque M, Eason E, Marcoux S, Lemieux F, Pinault JJ, Feldman P, Laperriere L. Randomized controlled trial of prevention of perineal trauma by perineal massage during pregnancy. *Am J Obstet Gynecol.* 1999 Mar;180(3 Pt 1):593-600.

Labrecque M, Eason E, Marcoux S. Randomized trial of perineal massage during pregnancy: perineal symptoms three months after delivery. *Am J Obstet Gynecol.* 2000 Jan;182(1 Pt 1):76-80.

The abstracts are available on the web

<http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=PubMed> (and search for perineal massage). Two other articles would also be of interests:

Johanson R. Perineal massage for prevention of perineal trauma in childbirth. *Lancet.* 2000 Jan 22;355(9200):250-1. No abstract available.

Eason E, Labrecque M, Wells G, Feldman P. Preventing perineal trauma during childbirth: a systematic review. *Obstet Gynecol.* 2000 Mar;95(3):464-71.

*Br J Obstet Gynaecol* 1997 Jul;104(7):787-791

Antenatal perineal massage and subsequent perineal outcomes: a randomised controlled trial.

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**OBJECTIVE:** To study the effects of antenatal perineal massage on subsequent perineal outcomes at delivery.

**DESIGN:** A randomised, single-blind prospective study.

**SETTING:** Department of Obstetrics and Gynaecology, Watford General Hospital.

**PARTICIPANTS:** Eight hundred and sixty-one nulliparous women with singleton pregnancy and fulfilling criteria for entry to the trial between June 1994 and October 1995.

**RESULTS:** Comparison of the group assigned to massage with the group assigned to no massage showed a reduction of 6.1% in second or third degree tears or episiotomies. This corresponded to tear rates of 75.1% in the no-massage group and 69.0% in the massage group ( $P = 0.073$ ). There was a corresponding reduction in instrumental deliveries from 40.9% to 34.6% ( $P = 0.094$ ). After adjustment for mother's age and infant's birthweight these reductions achieved statistical significance ( $P = 0.024$  and  $P = 0.034$ , respectively). Analysis by mother's age showed a much larger benefit due to massage in those aged 30 and over and a smaller benefit in those under 30.

*CONCLUSION:* Antenatal perineal massage appears to have some benefit in reducing second or third degree tears or episiotomies and instrumental deliveries. This effect was stronger in the age group 30 years and above.

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