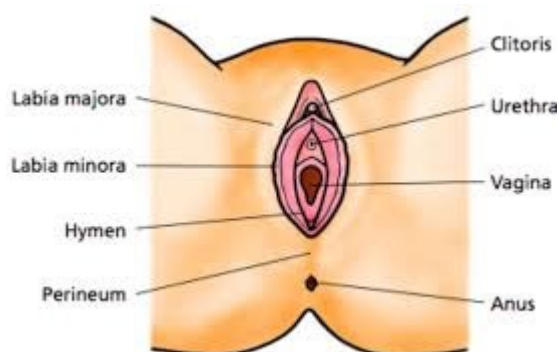


Patient information

Perineal massage during pregnancy and warm compresses in labour

Why massage the perineum?

The perineum is the area of tissue between your vagina and anus. Around 85% of vaginal births involve some degree of perineal trauma. Most heal without any problems or adverse effects, but for some there may be longer term implications.



It is thought that massaging the perineum during pregnancy may increase muscle and tissue elasticity and make it easier to avoid tearing during a vaginal birth.

What is the evidence for perineal massage?

During birth, 9 out of 10 first time mothers are likely to sustain some form of perineal trauma. For those who have more babies, this reduces to 7 out of 10.

A recent review suggested that perineal massage may be associated with higher rates of intact perineums. There is also some evidence that perineal massage in labour with a lubricant may reduce the incidence of third and fourth-degree tears and episiotomies (a cut in that area) when combined with a warm compress.

However, no effect was found on perineal trauma which required suturing (stitches), or second-degree tears.

How do I do perineal massage?

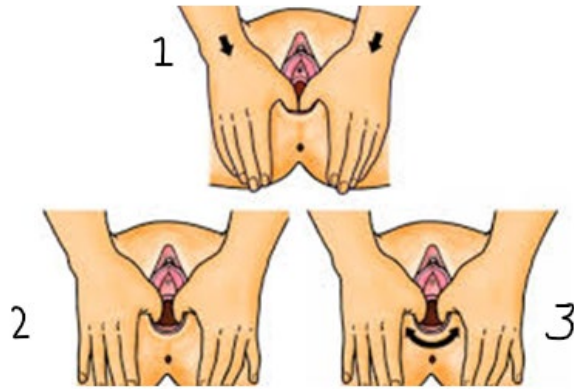
From 35 weeks onwards, you, or your partner if you prefer, can start perineal massage. You can continue this up until your baby is born and it may help reduce your risk of tearing.

Tips for performing perineal massage.

- Always wash your hands before doing perineal massage. Make sure your, or your partners nails are short to prevent any scratching of the delicate skin around the perineum.
- Try a warm bath or shower first. This may help make the massage more comfortable to do as the warm of the water can soften the area.
- Make sure your bladder is empty and then find a comfortable position (laying back on the bed, squatting against a wall, or standing with one foot raised and resting on the edge of the bath or chair, etc.) Use supports such as pillows, cushions and towels to help get you comfortable.
- You will need to use a lubricant – you can use an unscented organic oil such as olive, sweet almond or Vitamin E oil. If you are sensitive to any of these, you can use a water-soluble lubricant gel. Do not use baby oil, mineral oil or petroleum jelly. If you are doing the massage yourself, it is probably easiest to use your thumbs. Otherwise, your partner can use both index fingers.

To start

- Place your thumbs into the vagina and hold for about 1 minute (picture 1, page 3).
- Next press downwards towards the anus and to the sides of the vagina (picture 2, page 3). Again, hold this for about 1 minute. You should begin to feel a stretching sensation. Take some deep breaths.
- Finally, move on to massaging the lower part of the vagina using a 'U' shaped movement (picture 3, page 3). This movement should be repeated 2-3 times and last 2-3 minutes.
- Try to relax and practice slow, deep breathing techniques. The massage should not be painful.



Repeat this massage daily, or whenever possible. It may take a couple of weeks for you to notice any difference in elasticity of the perineum.

Do not do perineal massage if:

- You have vaginal thrush, herpes or any other vaginal infection.
- You think your waters have broken.

Where can I find more information on how to perform perineal massage?

You can use the resources below to find out more information or speak to your midwife.

Click this link: [Pregnancy Perineal Massage - Suffolk and North East Essex Maternity and Neonatal Services \(snewellbeing.org.uk\)](http://snewellbeing.org.uk)

Or scan the QR code.



The below link from the Royal College of Obstetrics and Gynaecologists (RCOG) provides some more information on reducing your risk of 3rd or 4th degree tears. They also have an animation video in Urdu, Bengali, Spanish, Arabic and Punjabi.

Click this link: [Reducing your risk of perineal tears | RCOG](http://www.rcog.org.uk).

Or scan this QR code.



What else can I do to reduce the risk?

Pelvic floor muscle exercises

It is very important to strengthen the muscles of your pelvic floor by doing regular pelvic floor exercises. You should do this throughout your pregnancy and continue to do them after your baby is born to help prevent bladder problems in the future. Ask your midwife for a leaflet which explains how to do them.

Warm compress during the second stage of labour

There is some evidence that a warm compress on your perineum during the second stage of labour (pushing) may further help to reduce your risk of third or fourth-degree tears, urinary incontinence and postnatal perineal pain.

This is simply a cloth that has been soaked in warm water and placed over the perineum whilst you push, and your baby's head stretches the perineal tissues. When you are admitted in labour, your midwife can discuss with you whether you wish to include this as part of your birth plan.

References

Beckmann MM, Stock OM. Antenatal perineal massage for reducing perineal trauma. Cochrane Database Syst Rev 2013;(4):CD005123

NICE guidance NG235 Intrapartum Care (2023)

RCOG Green top guideline 29 Management of third- and fourth-degree perineal tears 2015 [gtg-29.pdf \(rcog.org.uk\)](https://www.rcog.org.uk/gtg-29.pdf)

Clinical research

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the research and development department may contact you regarding specific clinical research studies that you might be interested in participating

in. If you do not wish to be contacted for these purposes, please email info.gov@wsh.nsh.uk. This will in no way affect the care or treatment you receive.

If you would like any information regarding access to the West Suffolk Hospital and its facilities, please visit the website for AccessAble (the new name for DisabledGo)
<https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



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