Perineal Stretching

This is a technique you can use near the end of your pregnancy to prepare your perineum to stretch without tearing during birth. If this is your first baby, there is evidence that practicing this technique will reduce the likelihood of a large tear and/or episiotomy. If this is your second or later baby, the evidence is equivocal.

Physiological pushing, varied positions for pushing, application of hot compresses, and birth under water are other techniques known to promote stretching of the perineum in labour; these are all cornerstones of midwifery care in labour. Midwives rarely cut episiotomies (an incision into the perineum), typically using them only to hasten the birth of the baby in the event of an abnormal fetal heart rate pattern.

This massage will help you get used to touch and pressure in a very sensitive area. A normal instinctive response to the pressure and stretching sensations in the vagina and rectum is to try and hold back, tense up, or resist the intensity. Perineal stretching will help to both increase the flexibility of your tissues and provide you with some training about how to relax into the very intense sensations of the pushing stage.

If you have a history of active genital herpes in your pregnancy, this technique should be avoided.

How to do it?
- You or your partner can do the stretching.
- You may prefer to have a warm bath ahead of time.
- Gather a lubricant, such as olive oil or KY Jelly.
- Start by washing your hands. Get a mirror, lay back comfortably and position the mirror so you can see your perineum (the skin between the bottom of your vagina and your anus).
- Place your thumbs 3-4 cm inside the vagina at the 5 and 7 o’clock positions. You will feel a band of muscle. Press into this muscle with consistent downward and outward pressure. Concentrate on relaxing and “bulging” the muscle outwards in response to the stretch. Continue to press down until you feel tingling or burning.
- Maintain the stretch and pressure for around 2 minutes, until the area becomes numb.
- Now work in the lubricant, maintaining the same pressure and stretch, but using a U-shaped massage, focusing on the length of the band of perineal muscle at the base of the vagina. Avoid the urethra (at the top of the vagina at the 12 o’clock position). You can attempt to pull the perineum forwards, which mimics the action of the baby’s head stretching outwards. Practice relaxing into the intense sensations.
- Massage for 3-4 minutes. If you have had a baby before and have scar tissue from a previous tear, focus the massage on the scar tissue which tends to be non-elastic.
- Practice this massage daily from 36 weeks onwards.
- After about 1 week, you should notice a marked increase in the flexibility of your tissue.