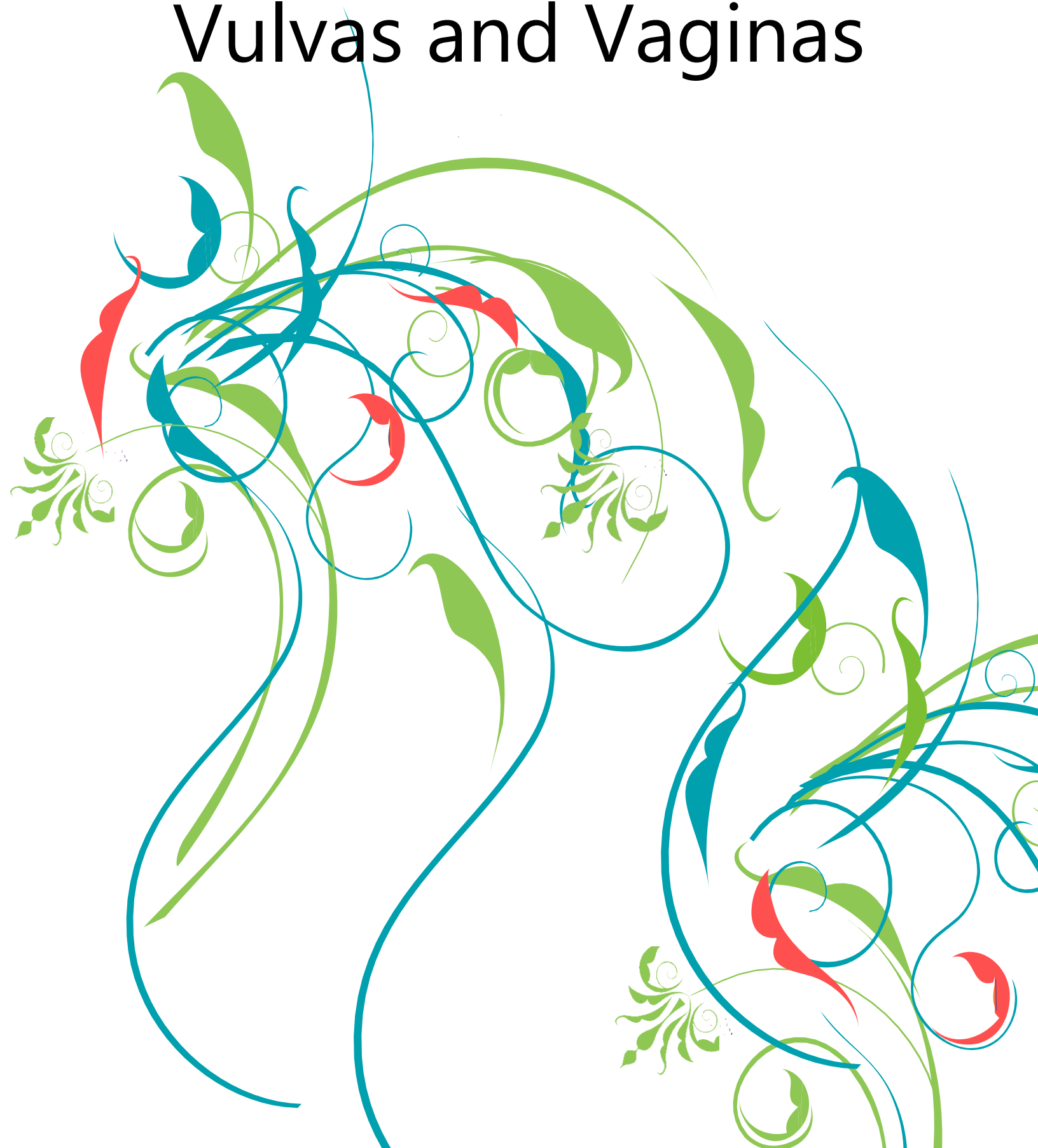
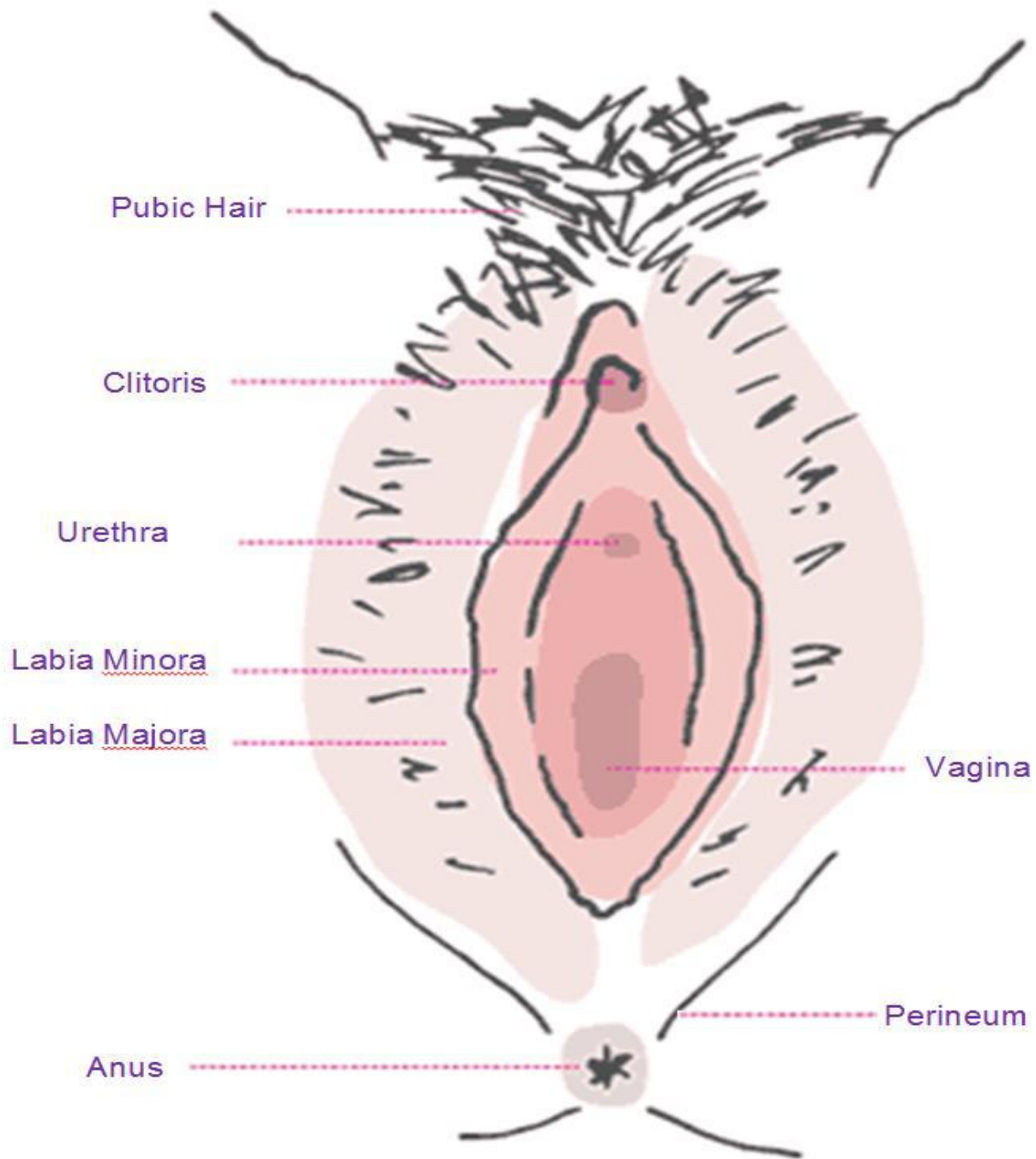


Vulvas and Vaginas





An Introduction to: **Vulvas and Vaginas**

What is a Vulva? The Vulva is the entire external female genitalia – inner and outer labia, clitoris, clitoral hood, mons, vestibule and urethral and vagina openings. This part of the anatomy gets called lots of funny names: vajayjay, muff, coochie, crotch, “down there,” and often it gets confused with the vagina – the stretchable passage that leads to the cervix and uterus and is involved in menstruation, intercourse, pregnancy and delivery.

Because the vulva and vagina are hidden, they can seem mysterious, confusing and even shameful. Let’s eliminate the mystery. Your vulva and vagina can be the source of much pleasure and it is a good idea to get to know them and all their wonders.

**Don’t be shy! Get to know your body! Look at your Vulva!
Stand or sit over a mirror and take a good look. Examining the Vulva is healthy; it gets you familiar and comfortable with your unique body and all its parts.**

Labia: The word labia means lips in Latin. The outer labia are two folds of skin and fatty tissue which are the colour of your skin or a bit darker. They are covered in pubic hair after puberty and surround the rest of the vulva. They can be large or small, short or long and, like breasts, can be two different sizes. They swell during arousal and are often very sensitive.

The inner labia are also sensitive and swell during arousal. These are the folds of skin that go from the clitoral hood to below the vaginal opening. They can vary in colour from pink to purple to brown to black, depending on your skin colour. Like nipples, inner labia can change colour with maturity and pregnancy. Sometimes the labia minora extend past the labia majora and sometimes they are inside. They too, can be two different sizes and lengths.

Masturbation: Touching, caressing, stroking, squeezing your own genitals to feel good, with or without orgasm is called masturbation. There are many ways to masturbate: rubbing the clitoris, inserting fingers or other objects into the vagina (never food please!), using a vibrator or shower head, rubbing against pillows or other objects, caressing or squeezing your breasts or nipples etc. etc. etc. Masturbation is perfectly normal and natural. It is also normal and natural not to masturbate. Masturbation can be fun and feel good and it can help you get to

know your own body and what feels good. This can allow you to help your partner(s) please you better. Masturbation also carries no risk of pregnancy, STIs or HIV (as long as you are not sharing toys) – so lay back and enjoy!

The Vagina, the Hymen and Virginity: The Vagina is the stretchable passage that leads to the cervix and uterus and is involved in menstruation, pregnancy and delivery. It is often called the birth canal because it is through the vagina that the fetus is pushed out of the body during childbirth. It is also the way menstrual fluid leaves the body and where the penis is inserted during heterosexual intercourse. The vagina often has a piece of skin or tissue at the opening which is called a hymen. At birth some vaginas have hymens that totally cover the vaginal opening, some have so little tissue that it seems they have no hymen at all and others are in between.

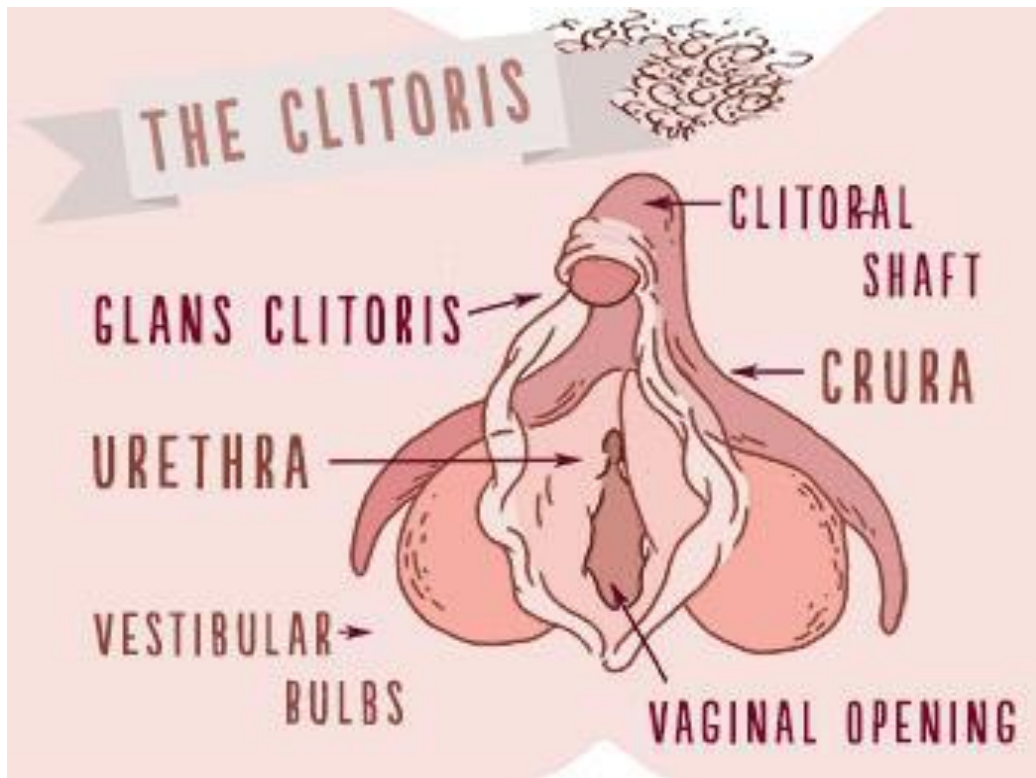
The hymen can stretch open or tear at first sexual intercourse, during masturbation, when inserting a tampon or during activities such as sports. Sometimes it may bleed. Many people and cultures question virginity when a hymen is not intact and the vagina does not bleed at first intercourse. However, this is problematic when some vaginas have little or no hymen at birth, or activities other than sexual activity tear the hymen. Therefore many people believe virginity does not rely on the hymen and bleeding but on whether or not a person has engaged in sexual intercourse.

Decorating your Vulva: Some people like to decorate their vulvas with piercings and tattoos. To ensure best results make sure the studio you go to is clean and sterile with a good reputation. Make sure the artist uses new, sealed and sterilized equipment. Ask to see their health board certificate and spore test certificate – you can never be too careful, it is your body and you have the right to protect it.

Some people also like to give their pubic hair a trim or remove it altogether. The skin on the vulva is extra sensitive, especially at menstruation and ovulation, so it is important to be careful and read instructions thoroughly if you are removing hair from home. If you are seeking professional waxing, sugaring, lasering or electrolysis services ensure the location is clean and sterile with a good reputation. Make sure all equipment used is new and that there is no double dipping into waxing or sugaring pots.

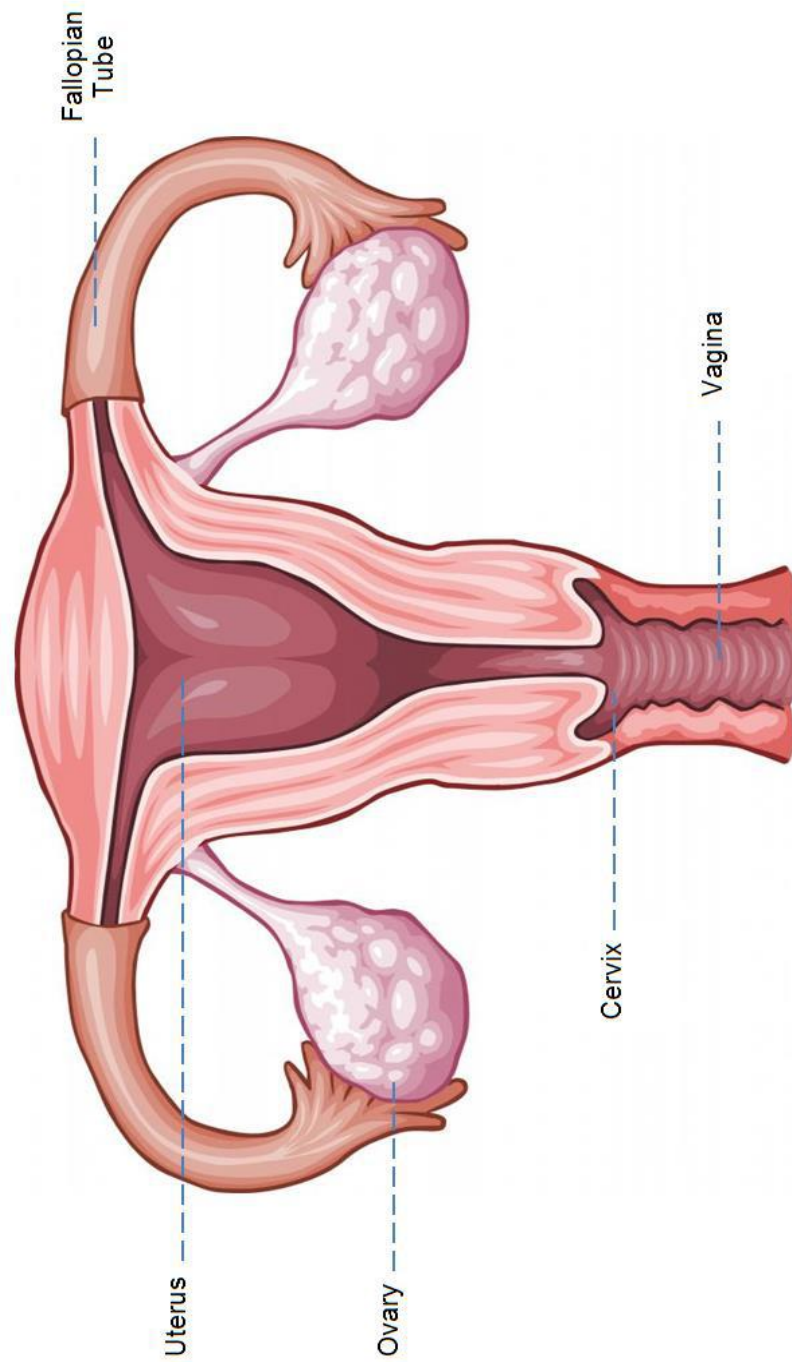
Clitoris: The clitoris is located beneath the point where the inner labia meet and has its own hood to protect it. The clitoris may seem and look small (approximately the size of a pea) but this is because the majority of the clitoris is hidden beneath the skin of the vulva. With arousal the clitoris becomes stiff and swollen just like a penis (but not as large and visible). But unlike the penis, the clitoris is designed only for pleasure.

The clitoris is the pleasure centre of the vulva. It does not have a central role in intercourse and reproduction like the vagina. The clitoris is there to make you feel good! Every clitoris will have a different sensitivity level. It is filled with thousands of nerve endings (6000 – 8000 to be exact). This allows it to be the cause of intense pleasure but for some it can be too sensitive to touch directly. Often stimulation around the clitoris is enough for great pleasure and orgasm. It is important to communicate to your partner(s) how you like to be touched.



Your Vulva and Vagina should not be mysterious to you. They are wonderful parts of your anatomy – both strong and delicate, and they deserve to be taken care of properly and with respect!

Female Internal Reproductive Organs



The Vagina

The vagina is a passageway starting with the opening (introitus) and ending with the cervix. The vagina is both delicate and strong with expanding walls. It has many roles such as: serving as the passageway for menstrual flow, serving as the birth canal for the delivery of a baby, allowing access to the cervix, accommodating the penis in sexual intercourse and preventing certain bacteria from entering the body.

When not in use, the vagina is collapsed. Its walls touch each other; however they are easily separated by a finger, a tampon, a penis or a baby. The width and length of the vagina vary from person to person, however the vagina is elastic. There are two layers of muscle which are able to expand to large proportions. If you feel inside your vagina you will feel that the walls are moist, soft folds of connective tissue.

The vagina is lined with the same moist, sturdy covering found in the mouth, allowing it to accommodate all the traffic through the vagina such as menstruation, sexual activity and childbirth. It is also remarkably resilient. When injured (e.g. scraped by a tampon applicator, fingernails or through sexual activity) the vagina can heal in 48 hours. All the regions of the vagina have a rich nerve supply. Areas closer to the opening are richer in nerve fibers than the area closer to the cervix and the front wall has more nerve fiber than the back.

For optimal health a certain level of acidity needs to be maintained in the vagina. The measure of acidity is called pH, an indication of the concentration of hydrogen in a solution. The lower the pH – which is measured on a scale from 1-14 – the more acidic the solution is. The human vagina has a pH of 3.5 – 4.5. It is acidic for your protection. Because the vagina opens to the outside world, bacteria can get in. The vagina's acid environment controls bacteria and prevents the harmful types from overgrowing.

Taking antibiotics can often lead to yeast infections because antibiotics while killing harmful bacteria, will also kill good bacteria in your vagina. Some people take probiotics as a preventative measure and/or eat natural yogurt every day.

Vaginal Secretions

Many people with vaginas wonder about their vaginal secretions. They wonder about what they see in their underwear, what they feel and see when wiping, what they see on pads, panty-liners, tampons and in Diva Cups. They wonder about the smell. They want to know if it is natural and normal.

Vaginal secretions are influenced by the amount of estrogen and progesterone circulating through the body. You always have these hormones but their levels rise and fall depending on where you are in your menstrual cycle. Hormonal methods of birth control introduce a steady level of estrogen and progesterone daily so that normal variations of the cycle are overridden and there are no cyclical variations in the cervical mucus.

This table shows the relationship between the menstrual cycle hormones and vaginal secretions. It is important to remember that not all cycles are exactly the same. Your cycle may vary from this example.

How Vaginal Secretions Changes			
Cycle Day	Estrogen	Progesterone	Secretions
1-7	low	Very low	Menstrual flow begins & ends, few secretions, dryness
8-13	Rises and peaks	Very low	Secretions increase
14-16	Drops sharply	Starts to rise	Ovulation, maximum clear mucus
17-25	Second small rise	Peaks	Secretions thicken and may turn yellowish
26-1	Drops slowly	Drops rapidly	Secretions diminish

Secretions are usually white or clear. Sometimes they can be slippery or sticky. Sometimes people call them discharge. It is the sign of a healthy vagina. There may also be a faint odour which may change depending on where you are in your menstrual cycle. This odour is also natural.

There is another type of secretion called lubrication, which makes the vagina feel slippery and wet. There is also a fluid which comes from the urethra of some people when they are sexually aroused. It is called ejaculate.

When vaginal secretions are a different colour or have a strong or different odour, it may be the sign of an *abnormal* secretion or infection and it is recommended you see a health care provider.

Vaginal secretions can be made up of:

- Oil and sweat from oil and sweat glands in the vulva
- Secretions from the Bartholin's and Skene's glands
- Moisture that comes through the vaginal walls
- Cells shed from the vaginal walls
- Mucus from the cervix
- Fluid from the fallopian tubes and uterus
- Products from bacteria that live in the vagina
- Salt water (the physiologic saline that makes up most bodily fluids)

Normal Vaginal Secretions

Mucus

Mucus is made in the cervix. At certain times this mucus is slippery, wet and stretchy. This happens before an egg is released from an ovary (ovulation), making it easier for sperm to swim through the cervix and fertilize the egg. Before and after ovulation the mucus is usually dry and sticky, making it harder for sperm to swim through the cervix because there is no egg to fertilize. It is a good idea to get to know the changes in this mucus and therefore the changes in your fertility.

Lubrication

This fluid is produced by the Bartholin glands near the opening of the vagina during sexual arousal. For some this happens quickly and easily, for others it may take longer. Sometimes it happens when you least expect it. Some people

lubricate a lot, some only a little. If there is little or no lubrication it may make penetration with such things as a finger, penis or sex toy uncomfortable or even painful. Artificial lubricants can help if the vagina is dry. If it is not dry you may still want to add more lubrication. If you are using condoms a water-based lubricant must be used to ensure you do not break down the condom. If you are not using condoms you can try using natural oils such as Olive Oil or Coconut Oil. The fewer the number of ingredients in the lubrication and the more natural it is, the better it is for your vagina. Flavoured lubrication or lubrication which tingles, heats up or cools down often irritates the vagina and vulva and can cause infection.

Ejaculation

For many, G-spot stimulation feels good. The G-spot is a small section of tissue located approximately a half finger length inside the front wall of the vagina. When stimulating the G-spot some may feel the urge to urinate and fear they will urinate if they allow their body to relax and have an orgasm. Sometimes fluid is released with orgasm, but the fluid, even though it comes from the urethra, is not urine. It is clear, has no odour and does not stain. There is often a lot of fluid and it may squirt out (often called squirting), this is called ejaculation. For some a G-spot orgasm is easily come by, for others it is a difficult achievement. Trying different ways to achieve this orgasm can be beneficial as some people find it easiest to achieve with specially made vibrators or dildos, while others find their fingers or the fingers of another the easiest way to orgasm and ejaculate. Having a partner you trust and are comfortable with is often the first step to achieving this type of orgasm with a partner.

Abnormal Vaginal Secretion

The vagina tries to maintain a healthy PH balance. Sometimes this balance gets upset. This may be caused by such things as douching, pregnancy, antibiotics, stress, diet, chemicals or birth control. When this happens, the discharge may be a different colour and odour. There may be itchiness, redness or a burning sensation when urinating. It is a good idea to see a health care provider if this happens. Sexual partners may also need to see a health care provider. It is best to avoid vaginal penetration with anything at this time.

Unusual Spotting or Bleeding

Sometimes a person may have some spotting (light bleeding from the vagina) when they are not menstruating. This may happen during ovulation or when your body is getting used to a new form of birth control. If it happens frequently or after penetration of the vagina you should see a health care provider.

Sexually Transmitted Infections (STIs)

A person can contract an STI if they are sexually involved with a person who is infected. Some common STIs are chlamydia, gonorrhea, HPV and herpes. While many people do not have **any** symptoms of an infection when they are infected, some will notice an abnormal discharge or odour coming from their vagina, burning when they urinate, swelling, irritation, bumps or redness. It is important to see a health care provider if you have any of these symptoms. Your partner(s) may also need treatment. If you do not have any symptoms and you are sexually active it is still a good idea to get tested.

To find out if you are infected with Chlamydia or Gonorrhea, a vaginal swab or urine test is performed. A Pap test is performed to determine if you have abnormal cells on the cervix that may be caused by HPV. A blood test is conducted to see if you have HIV, Hepatitis or Syphilis. If you are infected you can pass these infections and viruses on to your sexual partner(s). Condoms offer good protection against STIs.

Bacterial Vaginosis (BV)

Bacterial Vaginosis (BV) is the leading cause of vaginal complaints, however many people have never heard of it. It is often mistaken for a yeast infection and may produce mild or no symptoms. So what is BV? BV is an imbalance of the bacteria that live in the vagina. The imbalance occurs because the vagina becomes less acidic allowing the harmful bacteria to run wild. One bacteria in particular called lactobacillus (good bacteria) becomes depleted allowing an increase in the more harmful bacteria.

The cause of BV is not fully understood, however it is known that people who have never had sexual intercourse rarely get BV, BV is more common in people who have had multiple sexual partners, BV often develops soon after sexual activity with a new partner, people who douche are more likely to get BV and people who have an IUD are more likely to have BV. BV is not a sexually transmitted infection,

however it can be transmitted from one vagina to another, but not from a vagina to a penis. A health care provider must confirm with a swab that you have BV.

Signs and Symptoms of BV

- there may be no symptoms at all
- increase in vaginal discharge, discharge is grey-white and milk-like
- fishy odour
- burning or pain when urinating

Complications

- increased likelihood of developing Pelvic Inflammatory Disease (PID)
- increased risk of pregnancy complications if you have BV when you are pregnant such as premature delivery
- can affect fertility
- increased rate of abnormal Pap tests

Treatment

There is no “cure” for BV and it often comes back. No over-the-counter medications exist to treat BV. Your health care provider will have to prescribe an antibiotic. It is possible for BV to clear up on its own, however if you have symptoms, are pregnant, are planning on becoming pregnant, are having an abortion or are planning on getting an IUD inserted you should see your health care provider as soon as possible. Because people often assume they have a yeast infection when they actually have BV, it is important that you do not treat BV with medications used to treat yeast infections as this can cause more harm. If you are unsure about what is happening in your vagina, see a health care provider.

Yeast Infections

A yeast infection (Vaginal Candidiasis) is a common fungal infection caused by overgrowth of the naturally occurring yeast *Candida*. Most vaginas develop a yeast infection at least once in their life or they can contract them from another vagina. Although yeast infections can be transmitted sexually, they are not usually considered an STI. A penis can also contract a yeast infection from a vagina. The symptoms for a penis may be itching, red dots on the tip of the penis, dry peeling skin or burning during urination.

Common causes of a Yeast Infection

- Pregnancy
- Use of antibiotics or other prescription medications
- Sexual activity
- Poorly controlled diabetes
- A weakened immune system
- Genital moisture retention caused by tight fitting clothing or synthetic materials that do not breathe
- Diet

Signs and Symptoms of a Yeast Infection

- Vaginal and vulval itching and/or burning
- Swollen and/or red vulva and/or vagina
- Thick, white, clumpy discharge resembling cottage cheese
- Burning of the external genitalia when urinating
- Pain during penetration due to vaginal dryness and irritation

Treatment

Yeast infections can often be treated with creams or vaginal suppositories bought at pharmacies without a prescription. There are many brands and types of treatments. You can also now buy an oral pill over the counter without a prescription at pharmacies. Some people prefer natural methods to treat yeast infections or preventative methods, especially if they frequently get yeast infections. A Naturopath or Homeopath is a good person to talk to about this. If you are not sure if what you have is a yeast infection, it is best to see a health care provider **before** using any treatments, as these treatments could worsen your symptoms.

Yeast infections and BV can increase the risk of acquiring and transmitting STIs and HIV.

Follow the tips in the *How to keep your Vulva and Vagina Healthy and Happy* chart to help prevent yeast infections, BV and UTIs.

How to keep your **Vulva & Vagina** Healthy & Happy

Do	Do Not
<p>Vulvas likes to breathe. Go commando, or wear loose white cotton underwear – dyes can irritate.</p>	<p>Do not wear underwear to bed unless wearing pads or panty liners.</p>
<p>Wash hands before & after going to the washroom, as you often touch yourself when using menstrual products and wiping. Wipe from front to back.</p>	<p>Thongs or G-strings can carry bacteria from the anus to the vagina and can cause breaks in the skin on your perineum (perineal fissures).</p>
<p>Try natural menstrual products such as the Diva Cup, Lunapads or products made of unbleached organic cotton.</p>	<p>Do not wear panty liners or pads every day. Repeated use can be abrasive and irritating.</p>
<p>Have safer sex. Try lubricated condoms to protect your vulva and vagina from infection. Use lubrication to reduce friction and irritation.</p>	<p>Do not have sex in the sand, dirt or submerged in water. This can irritate your vulva and vagina and cause infections. Long baths in hot water can also dry out and irritate the vulva.</p>
<p>Clean sex toys. Mild soap and warm water work best. Air dry.</p>	<p>Do not be afraid to masturbate. Do not share sex toys.</p>
<p>Good general health is the best defense against infections and problems anywhere in the body, including the vulva and vagina. Eat well, drink water, get adequate sleep, exercise.</p>	<p>Clothing that can trap moisture, such as tight jeans, panty hose, spanx or those made of synthetic materials such as spandex, polyester or nylon should not be worn for long periods of time.</p>
<p>Use a soft cloth or fingers and warm water to clean your vulva - no soap. Pat dry gently, do not use a hairdryer to dry. Do not dry between the labia.</p>	<p>Avoid perfumed soaps, feminine hygiene creams or sprays and bubble bath. Chemicals are harmful to the vulva vagina, use as few as possible.</p>

Do	Do Not
<p>See a Health Care Provider if you have lumps, bumps, abnormal discharge, increased discharge, a foul odour, a strong odour, swelling or pain. Ask about the HPV vaccine.</p>	<p>Do not douche or clean inside the vagina, this will disturb your natural pH balance and could destroy the natural good bacteria in the vagina. It could also cause PID, ectopic pregnancy and odour.</p>
<p>Have regular Pap tests and pelvic exams. Have regular STI testing if you are sexually active. Use white, unscented toilet paper.</p>	<p>Do not put Vaseline, lotions, flavoured condoms, flavoured lube, baby oil, scented menstrual products, Cola or food inside a vagina.</p>
<p>Urinate soon after sexual activity to flush out the urethra, do not hold urine.</p>	<p>Do not share unwashed towels, washcloths, underwear or bathing suits.</p>
<p>Ask a Health Care Provider, such as a Pelvic Therapist, if Kegel exercises will be beneficial – they are not for everyone.</p>	<p>Do not use fabric softener, bleach or dryer sheets – they coat fabric in irritating residue.</p>
<p>Explore, look and touch your vulva and vagina often so you will notice how and when they change.</p>	<p>Do not be afraid to seek information, ask questions or talk to others about your vulva and vagina – that is how we learn.</p>
<p>Be careful when trimming, shaving, removing or dyeing pubic hair – the skin on the vulva is sensitive.</p>	<p>Do not sit around in damp or wet clothing. Do not use powders such as Talcum powder or baby powder.</p>
<p>Clean anything that will touch the vulva or vagina (e.g. your hands, someone else's hands, sex toys).</p>	<p>Do not touch the vulva or vagina with anything that has touched an anus, unless it has been thoroughly cleaned first, as this can lead to an infection.</p>
<p>Vulvas & Vaginas are beautiful & unique; treat them with dignity & respect.</p>	<p>Don't be afraid to examine and admire your Vulva & Vagina. Get out the hand mirror!</p>

Love ♥ your Vulva and Vagina.

Is it Yeast or BV?

<u>Symptom</u>	<u>Yeast</u>	<u>BV</u>
Odour	Usually none	Strong fishy odour
Discharge	None, to watery, to thick curds	Thinner, gray to white
Itching	Yes	Mild, if any

Urinary Tract Infections (UTI)

A urinary tract infection (UTI), sometimes called a bladder infection, occurs when a large number of bacteria grow in the urethra, the bladder, the ureters or the kidneys. Infections in the urethra and bladder can be annoying and painful, but can usually be easily treated with antibiotics and will clear up within days. Kidney infections are more serious and can take longer to clear.

Urethra: the tube that leads from the outside of the body into the bladder

Ureters: the tubes that carry urine from the kidneys to the bladder

Symptoms of a UTI:

- Painful urination
- Frequent urination
- The need to urinate constantly or suddenly and immediately
- Blood in the urine
- Pain over the bladder, in your back or in your sides
- Cloudy urine (due to white blood cells and bacteria in the urine)

It is possible for an UTI to clear without treatment. If you are in good health and do not have a history of UTIs you can treat yourself with a large amount of fluids for 24 hours to see if the symptoms improve. Natural cranberry juice can also help by preventing bacteria from multiplying. If the symptoms persist for more than 24 hours, you develop chills and a fever, you vomit, or there is pain in the back near the kidneys, you need to see a health care provider.

Due to the location of the urethra, people with vulvas and vaginas are predisposed to UTIs. The urethral opening is located close to the anus, a common

source of bacteria, and close to the vagina, allowing sexual activity to move bacteria into the urethra. In addition, the urethra is only about an inch long making it a short distance for bacteria to travel to the bladder.

Endometriosis

Endometriosis is a painful, chronic disease that occurs when the endometrial lining of the uterus is found growing outside the uterus. Under the same hormonal influence that stimulates the uterine lining to be shed as menstruation, this tissue found outside the uterus thickens and bleeds in a monthly fashion as well but has no way of leaving the body. This results in internal bleeding and inflammation. Endometrial growths can be found on the ovaries, fallopian tubes, uterus, pelvic floor, abdomen, stomach, intestines, bowel, rectum, lungs, kidneys, bladder, urethra, ureter, cervix, vagina and vulva. Less commonly they can be found on or in the lungs and in the thighs and arms. Severe cases may invade organs. The cause of endometriosis remains unknown. However, it may run in families.

The Endometriosis Association

The ultimate goal of the Endometriosis Association is to find a cure and prevention for endometriosis while at the same time providing education, support, and research to those affected. They are an international non-profit organization that provides information about endometriosis in numerous languages. www.endometriosisassn.org

Symptoms:

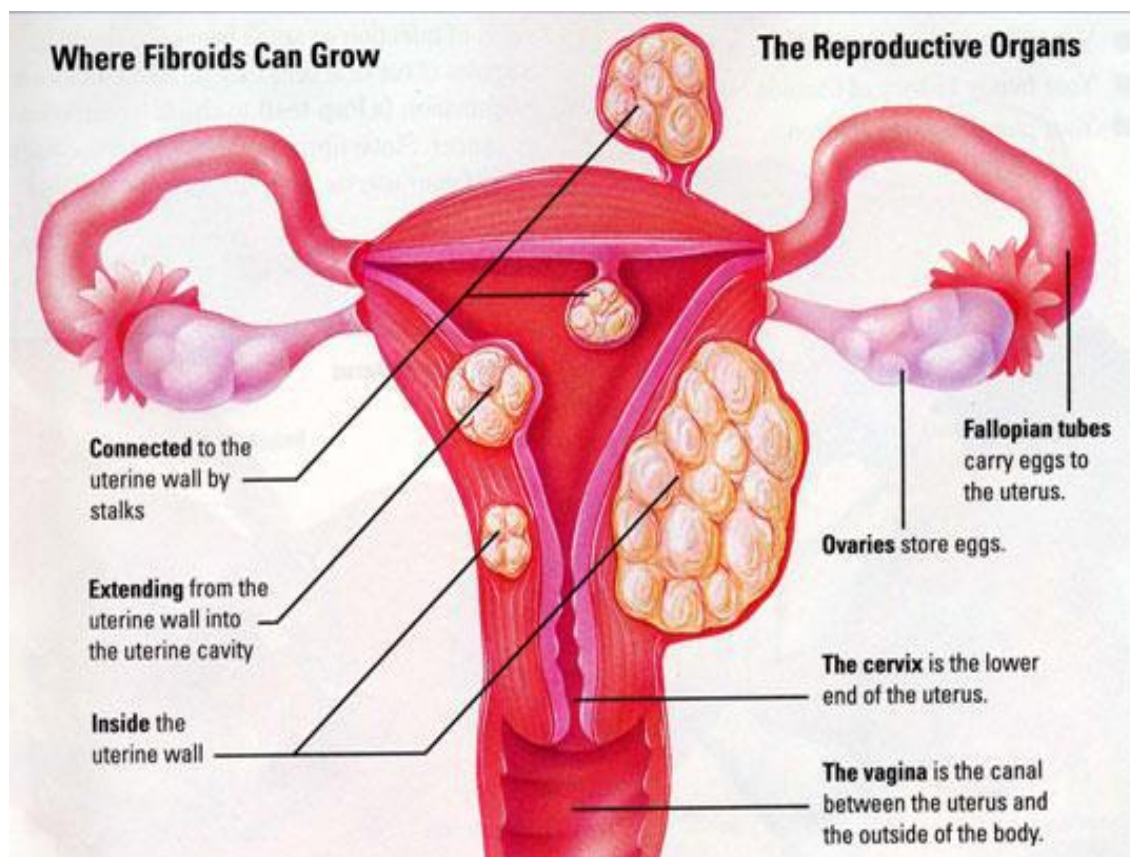
- Most common symptom: Moderate to severe pain
- Painful menstrual periods (dysmenorrhea)
- Pain with intercourse (dyspareunia)
- Irregular bleeding, heavy bleeding, bleeding between periods
- Infertility
- Irritable Bowel Symptoms, painful bowel movements
- Fatigue, exhaustion, low energy
- Gastrointestinal upsets (e.g. diarrhea, constipation, nausea)
- Lower back pain, pain when sitting
- Pregnancy and labour complications
- No symptoms

Possible Treatments:

There is no cure for endometriosis. Often the recommended treatment is hormonal, often in the form of oral contraceptive pills or injections. Some people have surgery to help relieve pain and increase fertility. Others will try naturopathic or homeopathic care. Other treatments often include chiropractic, massage, acupuncture, vitamins and change in diet and exercise.

Fibroids

Fibroids are made of smooth muscle and are solitary, firm and benign. They are found alone or in groups on the outside, inside or within the wall of the uterus, often changing the size and shape of the uterus. Fibroids are common, however their cause is unknown, but they seem to be related to estrogen production. Fibroids are capable of enlarging, sometimes rapidly, especially if you are pregnant, using oral contraceptives or taking estrogen. They should be monitored, and they may or may not need to be removed.



Symptoms:

- Pain
- Bleeding between periods
- Excessive menstrual flow
- Abdominal and/or back pain
- Urinary problems
- Constipation
- Enlarged belly
- Difficulties conceiving or sustaining a full-term pregnancy
- No symptoms

Ovarian Cysts

Ovarian cysts are small fluid-filled sacs that develop in the ovaries. Most cysts are harmless, but some may cause problems such as rupture, bleeding, or pain. Moreover, surgery may be required in certain situations to remove the cyst(s).

The vast majority of ovarian cysts are considered functional. This means they occur normally and are not part of a disease process. Most ovarian cysts are benign, meaning they are not cancerous, and many disappear on their own in a matter of weeks without treatment. The functional cyst forms during ovulation either when the egg is not released from its follicle or the follicle does not dissolve after the egg is released.

Usually ovarian cysts do not produce symptoms and are found during a routine physical exam or are seen by chance on an ultrasound performed for other reasons. However, symptoms can be present, especially with large cysts. The following symptoms may be present:

- Lower abdominal or pelvic pain, which may start and stop and may be severe, sudden, and sharp
- Irregular or painful menstrual periods
- Feeling of lower abdominal or pelvic pressure or fullness
- Pelvic pain after strenuous exercise or sexual intercourse
- Pain or pressure with urination or bowel movements
- Spotting
- Infertility
- Nausea and vomiting

Pelvic Exams

What is a pelvic or gynaecological exam?

A pelvic exam is a way for your health care provider to examine your reproductive organs (vulva, vagina, cervix, fallopian tubes, ovaries & uterus) and check for any gynaecological problems. A Pap test specifically looks at the cells on your cervix to see if there are unhealthy changes in the cells.

When should I have my first pelvic exam?

Cervical screening (Pap test) is recommended every three years beginning at age 21 for anyone with a cervix who are, or have been, sexually active. Sexual activity includes anal, oral and vaginal intercourse, as well as digital intercourse (fingering) and sharing of sex toys, with a partner of any gender. People with a cervix who have not been sexually active by the age of 21 can delay cervical screening. Unless your health care provider suggests otherwise you should have an exam every three years. However, when you should have your first pelvic exam and how often you have an exam will depend on factors such as: your family history, your sexual history, your health, whether or not you use contraception and what type of contraception you use.

There are other important reasons to have a pelvic exam including:

- Unexplained pain in your lower belly or abdomen, on the vulva or in the vagina
- Vaginal discharge that causes itching or burning or smells bad or strong
- No menstrual periods by age 16
- Vaginal bleeding that lasts more than 10 days or is extremely heavy
- Missed periods, especially if you are having sex
- Extremely painful menstrual cramps

Will I need a pelvic exam if I am a virgin?

Even if you are a virgin you may need a pelvic exam for any of the above reasons. If you have a pelvic exam you are still a virgin. Many people define virgin as someone who has not had vaginal intercourse but this is not the only definition.

What should I do before the exam?

When you make your appointment, be sure to let the receptionist or nurse know if it is your first pelvic exam. They can answer your questions and help explain what to expect so that you will not be worried. Do not have sex, use vaginal creams, or douche 24 hours before the exam. Do not schedule the appointment during your menstrual period. If your cycle is irregular and your appointment turns out to be during your menstrual period, phone the day before and ask the receptionist if you should reschedule.

What kinds of questions will my health care provider ask me?

Your health care provider may ask you questions about:

- Your general health, allergies and medications you are taking
- Your menstrual period, such as: how old you were when you first got your period, how long it lasts, how often it comes, how much you bleed, the first day that your last period started (LMP), if you have cramps, and at what age your breasts started to develop
- Whether or not you have had sex, are sexually active or been sexually abused or assaulted
- Whether you use any form of contraception
- Whether you are in a relationship
- If you have vaginal itchiness or any unusual discharge or odour from your vagina

Before the exam

- If you find it comforting a friend or family member can stay with you during the exam
- A female will also be in the room during the exam if the person performing the exam is a male, usually a nurse
- After you have given your medical history (they may also take your blood pressure and weigh you) you will be asked to put on a gown
- You will need to remove all your clothes (except your socks), including your bra and underwear
- A breast exam is often conducted as part of this routine check-up to look for lumps and abnormalities in the breasts, if it is not you should ask why

What happens during the exam?

- Your health care provider will explain the steps of the exam and ask you to lie down on the examining table. You will be given a sheet to put over your stomach and legs.
- You will be asked to move down to the end of the table and either place your feet in stirrups (holders for your feet) or place your feet together.
- With your knees bent, you will be asked to let your knees fall to each side allowing your legs to spread apart.

This is usually the part when most people feel shy and embarrassed, this feeling is normal. Remember that this exam is routine for health care providers and their only concern is for your health.

There are 3 parts to this exam. Sometimes not all parts of the pelvic exam are necessary.

The External Exam

- Your health care provider will first look at your vulva (clitoris, labia, vaginal opening, urethra opening and rectum) to ensure everything looks healthy.

The Speculum Exam

- The speculum is an instrument made of metal or plastic, some say it looks like a duck bill. Your health care provider will place the speculum into your vagina (they will use lubrication). After it is inserted it will be gently opened so that your health care provider can see your vagina and cervix (the opening to your uterus). If you like you can ask your health care provider for a mirror so that you can see what your cervix looks like.
- After checking your vagina and cervix, your health care provider will take a thin plastic stick that may have a small brush on the end, and gently wipe away some of the cells from your cervix. This is a Pap test, which detects early changes in the cells of the cervix before they become cancer. Most often the results of the Pap test come back normal. HPV could be one cause for abnormal cells on the cervix.
- If you are having abnormal vaginal secretions, your health care provider will take another swab to test for yeast and other causes of discharge.
- If you ask (or they may ask you), your health care provider can take another swab to test for Sexually Transmitted Infections (STIs).

- **They do not automatically test for STIs.** They can take a swab to test for chlamydia and gonorrhea (blood tests are necessary to test for other STIs).
- When all of these swabs have been taken, your health care provider will close the speculum and gently take it out.

The Internal Exam

- The last part of the pelvic exam is done to check your reproductive organs (fallopian tubes, ovaries and uterus). Your health care provider will insert one or two gloved fingers into your vagina. With the other hand they will gently apply pressure to the lower part of your abdomen. You may feel slight discomfort or pressure when they press in certain places, but it should not hurt. If you feel pain, it is important to tell your health care provider.

What happens after the exam is over?

Your health care provider will answer any questions you have and tell you when to make your next appointment. They will also talk to you about any medications you may need and tell you when and how you will get the results of the exam. A contraception discussion may also be had.

What do the results of my Pap test mean?

Most often the results of your Pap test will be normal and you will not be contacted. If the results of your Pap test are abnormal you will be contacted. It may take several weeks before they have the results. Abnormal results mean one of two things:

- **Cell Changes** – Some of the cells on your cervix have changed or are abnormal. This is common. Your health care provider may ask you to return for a Pap test earlier than usual (i.e. in 3 or 6 months). For most the abnormal cells change back into normal cells on their own.
- **Cancer** – Severe cell changes on your cervix that need specialized treatment. Human Papilloma Virus (HPV) is the cause of cervical cancer. Many people will have this virus in their life, a small number of which will develop cancer. Most will have no signs or symptoms that they have been exposed to this virus until they have a Pap test. Your health care provider will probably want you to have a colposcopy.

What is a Colposcopy?

A colposcopy is an exam that looks at the cells of your cervix more closely and usually takes 10 to 15 minutes. The health care provider will use a special microscope to look at your cervix. A speculum will be placed in your vagina the same as when you have a Pap test and the cervix will be washed. The microscope is placed near the opening of your vagina; it will not touch you. A closer look will be taken of your cervix through the microscope and a biopsy may be taken.

What is a Biopsy?

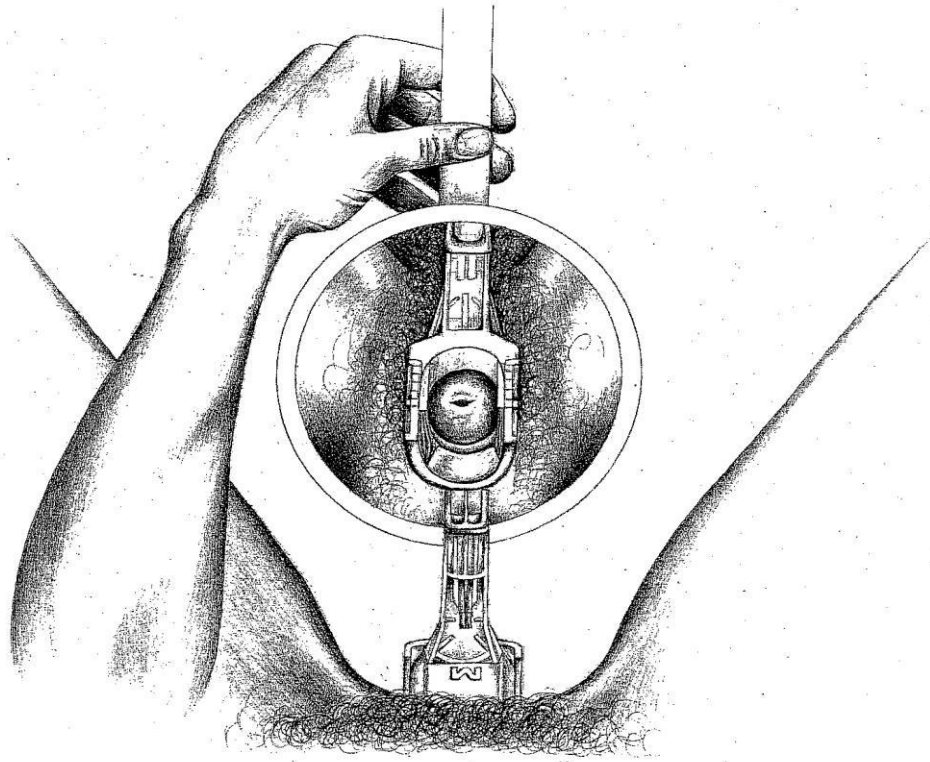
A biopsy is when a health care provider takes a small sample of the cells on your cervix. This can be uncomfortable. You might feel cramps like when you have your period. You may also have some spotting or bleeding for a few days afterward. The biopsy will be sent to a laboratory for further tests. It may take several weeks for the results of the biopsy. Treatment will depend on the results of the biopsy. Cancer of the cervix can be treated with surgery, radiation, chemotherapy and other treatments.

What else can you do?

- Always use a condom to help protect yourself from HPV
- Avoid tobacco smoke – smoking and second hand smoke can cause mild cell changes on your cervix to progress to cancer
- Always go for regular Pap tests – even if your results are normal
- Talk to your health care provider about your sexual health
- Take care of yourself; eat healthy, drink water, exercise, get enough rest



The Cervix



This diagram shows a vagina with a speculum inserted allowing a view of the cervix, which is at the back of the vagina. The speculum keeps the walls of the vagina open. In its resting state the walls of the vagina fall into one another. They only open when something is inserted such as a speculum, a tampon, a finger or a penis. The best way to see your vulva, vagina and cervix is with a hand mirror.

Normal cervix



Sexual Health Internet Resources & Books

The Society of Obstetricians and Gynaecologists of Canada

sexualityandu.ca

menopauseandu.ca

endometriosisinfo.ca

hpvinfo.ca

iwHP.ca – International Women’s Health Program

Taking Charge of Your Fertility: tcoyf.com

Ontario Midwives: aom.on.ca

Menstruation: divacup.com lunapads.com

Sexual Health Adult Retail Stores: comasyouare.com goodforher.com

Sexual Assault Support Centre of Waterloo Region: sascwr.org

Sexual Health

Plannedparenthood.org

the-clitoris.com

beautifulcervix.com

womenshealthmatters.ca

The Boston Women’s Health Collective (2011). **Our Bodies Ourselves.**

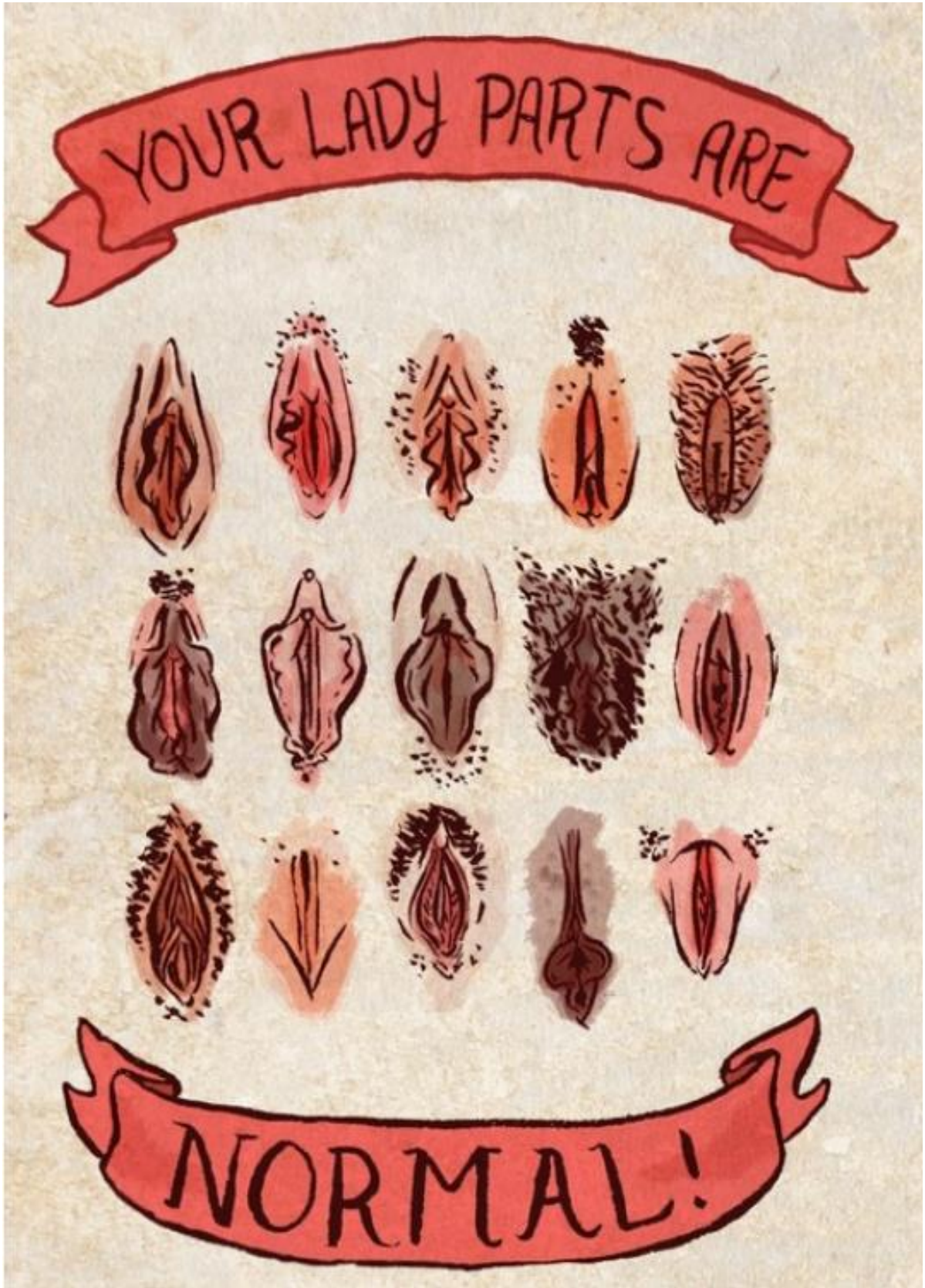
Northrup, Christine (1998). **Women’s Bodies, Women’s Wisdom: Creating Physical and Emotional Health and Healing.**

Rankin, Lissa (2010). **What’s Up Down There? Questions you’d only ask your Gynecologist if she was your best friend.**

Stewart, Elizabeth & Spencer, Paula (2002). **The V Book: A Doctor’s Guide to Complete Vulvovaginal Health.**

Winston, Sheri (2011). **Women’s Anatomy of Arousal.**

Federation of Feminist Women’s Health Centres (1991). **A New View of a Woman’s Body: A fully illustrated guide.**



For more information contact:

Stacey Jacobs, MSc

Community Sexual Health Education Manager

SHORE Centre

Sexual Health Options, Resources & Education

235 King Street East, Suite 130
Kitchener, ON N2G 4N5

Email: education@shorecentre.ca

Website: shorecentre.ca

Phone: 519 743 9360



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