



Bump et al. “Assessment of Kegel pelvic muscle exercise performance after brief verbal instruction.” 1991

Article Executive Summary

This article aimed to determine if women can correctly perform a Kegel exercise, or pelvic muscle contraction, following only verbal instruction.

APA Citation

Bump, R. C., Glenn Hurt, W., Andrew Fantl, J., & Wyman, J. F. (1991) Assessment of Kegel pelvic muscle exercise performance after brief verbal instruction. *American journal of obstetrics and gynecology*, 165(2) (1991): 322-329.

Methods

47 women with a mean age of 53.6 were studied. 60% of the women complained of urinary incontinence. Urethral pressure profiles via standardized urodynamic evaluation were completed both at rest and during a Kegel pelvic muscle contraction following verbal instruction that was standardized. The verbal instruction given is as follows: “contract the muscles you would use if you were trying to keep from losing your urine or if you were trying to stop your stream after you had started to urinate.” Participants clarified that the verbal instructions were understood, and they were allowed to rest after practice contractions and prior to being tested. Determination of an “effective Kegel effort” was based on the urethral pressure profile and on measured Valsalva effort.

Results

49% of the women demonstrated a pelvic muscle contraction that created a significant increase in the force of urethral closure without a noted Valsalva maneuver. 25% of the women demonstrated an effort that could promote urinary leakage. A successful effort at performing the pelvic muscle contraction was not related, in this study, to age, number of births, weight, estrogen deprivation, prior surgery, or passive urethral function.

Clinical Implications

The authors conclude that simple verbal or written instruction may not adequately prepare a woman for a home program that involves pelvic muscle contractions, also termed Kegels. Clinically, this conclusion leads to the importance of objective measures to ascertain accuracy of the instructed task. Perineal observation, abdominal wall observation, external palpation of perineum and abdominal wall, perineometry, pressure biofeedback, and digital palpation are methods that can be used clinically to determine that a patient is correctly completing a pelvic muscle contraction.

