

Patient Information

Arden Cancer Centre**Vaginal Dilators Information Leaflet****Introduction**

Radiotherapy to the pelvis in women can lead to narrowing and shortening of the vagina, it may also become dry and lose some of its natural elasticity. Additionally, surgery and radiation-induced menopause or natural menopause may intensify the symptoms.

This may cause problems in the future whilst undergoing vaginal examinations or during vaginal intercourse. For this reason your consultant has advised the use of vaginal dilators.

The dilators will help keep the vaginal muscles supple as well as preventing the vaginal walls from becoming stuck together – this should make pelvic examinations and vaginal intercourse easier.

What are vaginal dilators?

Vaginal dilators are smooth, cylindrical-shaped plastic tubes in a range of sizes which enables gentle progression as you get used to the dilators. The tubes are easy to insert into the vagina and come with a twist-lock handle and a tube of lubricating gel, supplied in a cosmetic bag. Further supplies of the gel are available from your GP on prescription or otherwise any water-based lubricant can be used.

When should I use the dilators?

Generally dilation should start between 2 and 8 weeks after your radiotherapy has finished.



How do I use the dilators?

We suggest that you start with the smallest size and progress to the next size when you feel ready.

- Slot a clean dilator into the handle and apply some of the lubricating gel onto the dilator.
- Find a comfortable position, for example lying on your bed or standing with one foot resting on a chair. Then separate your labia (vaginal lips) and gently insert the rounded end of the dilator into the vagina (only the white part, not the handle).
- Exerting gentle pressure, move the dilator up into the vagina by rotating the handle clockwise until you have gone in as far as is comfortable for you. The dilators must not be applied with force.
- Leave the dilator in place for about a minute or until your pelvic floor feels relaxed, then gently rotate the dilator and pull slowly until it is nearly out, then reinsert again. If this is comfortable progress to the next size.
- Gradually increase the size of dilator so that you feel a gentle stretch. You may not be able to use all of the dilators.
- Repeat this for a couple of minutes, at least 2 to 3 times a week.

When you have finished, remove the dilator and wash it and the handle in warm soapy water, rinse and dry well. Sometimes there can be a spot of blood on the dilator. Do not worry about this. If you experience any soreness, heavy bleeding or pain, stop using the dilator and contact us for advice (see below).

It can be useful to use the dilators in conjunction with pelvic floor exercises. Relax the pelvic floor muscles whilst moving the dilator around but then practise gripping the dilator with your pelvic floor muscles. A separate information sheet on how to perform pelvic floor exercises is available from the Macmillan Radiotherapy Specialist or your Gynae Nurse Specialist.

Dilation therapy may also include the use of vibrators or fingers. It may not be necessary if vaginal intercourse is resumed weekly (or more) following treatment.

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You should continue with dilation on a regular basis. This may be for 12 months following treatment. Your consultant will be able to advise you about this at your follow-up appointments.

Can I have sex?

If you wish to have vaginal intercourse during treatment, please discuss this with your Oncologist, Specialist Nurse or treatment Radiographer. You may not need to use dilators if you have intercourse at least once a week.

You may notice some slight bleeding after intercourse, or when you remove the dilator. This is nothing to worry about. Again should the bleeding become heavy or last a long time, please contact us for advice.

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The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 7290 and we will do our best to meet your needs.

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