

# Inserting and Removing Your Pessary

## How do I insert my pessary?

Always wash your hands with soap and water before inserting or when removing your pessary.

Make sure your hands are dry before handling your pessary, wet hands may make it slippery and difficult to handle. Some women find it easiest to insert a pessary while standing with one foot up on a stool, while the other foot is on the ground. Other women insert it while lying flat on a bed. With more practice, it will get easier.

1. Hold your pessary firmly between your fingers and your thumb and fold it in half. The curved part should be facing the ceiling when you are ready to insert it. It will look like the shape of a taco.

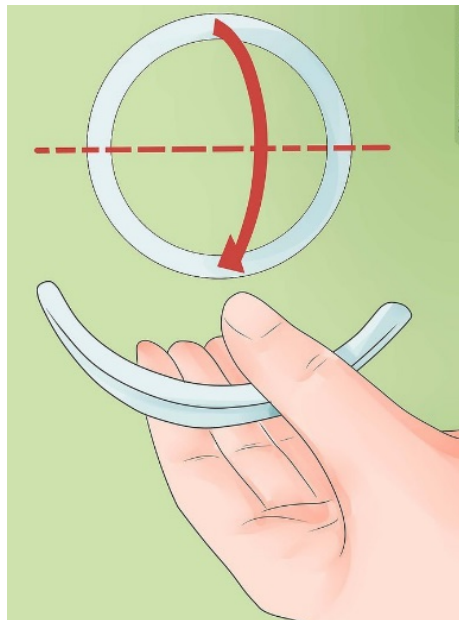


Figure 1

2. Place a small amount of water-soluble lubricant on the pessary edge **only** that will be inserted first into your vagina. Do not cover the whole pessary with lubricant because it will be difficult to hold. You can purchase the lubricant at most pharmacies. Some examples are K-Y Jelly® or Astroglide®. Do not use Vaseline or any other non-water soluble product.



Figure 2

3. Holding the folded pessary in your dominant hand, spread the lips of your vagina apart with your other hand. It is important to spread the lips in a **sideways** motion, not in an upward motion, which will only stretch the lips and not help to open the vagina.



Figure 3

4. Gently push the folded pessary, lubricated end first, into the vagina. The pessary should be inserted lengthwise into the vagina. The vagina is a closed area, so it cannot go anywhere else inside the body.

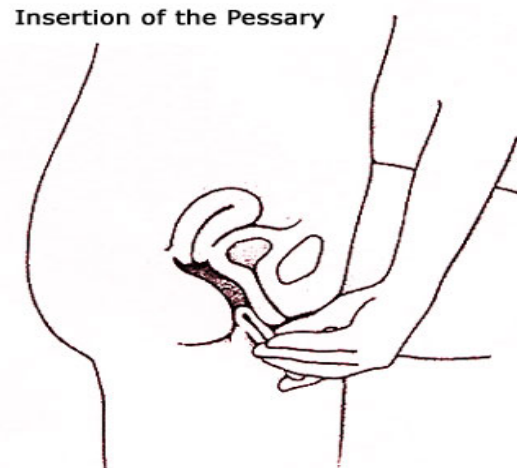


Figure 4

5. Release the pessary once inside. It will unfold and return to its normal shape.
6. If it does not feel comfortable, use your index finger to gently push it in a little farther. You can't hurt yourself or the pessary doing this. The rim of your pessary should sit just under the pubic bone at the front of your vagina.

It is **okay** to be able to feel it a little with your finger at the opening. You do **not** need to push it up as high as it can go, actually we want it near the opening to work best. Pessaries will find the proper position on their own, it's actually hard to do this wrong! You should not be able to feel discomfort from the pessary once it is properly positioned.



Figure 5

### **How do I remove my pessary?**

1. Wash your hands with soap and water. Some women find it is easiest to remove a pessary while standing with one foot up on a stool while the other foot is on the ground. Other women do this while lying flat on a bed or sitting on a toilet. With more practice, it will get easier and you will learn what works for you.
2. Insert your index finger into your vagina and find the rim of your pessary. It should be just under the pubic bone at the front of your vagina.
3. Gently hook your finger under or over the rim of the pessary.



Figure 6

4. Tilt your pessary slightly, so it is slanted a little bit.
5. Gently pull down on the pessary until it is out of the vagina. Try to pull a little bit toward the back, where the rectum is, rather than forward toward your bladder.
6. Bearing down slightly as if you were having a bowel movement may help to push the rim of the pessary forward so you can grasp it more easily. It is very unlikely that you will hurt yourself or the pessary doing this.
7. You may feel pressure just before and as the pessary is coming out. This is normal.
8. Wash your hands and your pessary with antibacterial soap and water only.
9. Store the pessary in a clean, safe area until you are ready to replace it.

### **Tips for Using a Pessary**

1. You might see a little spotting of blood when you remove or insert the pessary. As long as it's just spotting for a day or two, do not worry.
2. You can use any kind of antibacterial soap to clean it. You do not need anything specific or medical.
3. Remove your pessary **at least** once every 3 months. The more often you remove and clean it, the less discharge you will see. How often women remove their pessaries varies. Find what is comfortable for you.
  - a. When you remove it, leave it out overnight and replace it in the morning.
  - b. There is no need to douche or clean the vagina.
4. Discharge is very common with pessaries, but rarely means you have an infection.

The most likely time for the pessary to fall out is when you are straining for a bowel movement.

- a. Don't strain for bowel movements! If this is a problem for you, call us to learn about fiber and stool softeners.
  - b. You may need to place your hand at the vaginal opening to hold in the pessary if you can feel it start to come out as you have a bowel movement.
  - c. If it does fall into the toilet, retrieve it from the toilet bowl before flushing. Pessaries can clog the toilet and cause expensive plumbing bills.
5. If the pessary feels like it's rubbing on the vaginal tissue, call us for advice on lubricants or estrogen cream.
  6. If the pessary falls out, put it in a safe place and call us. You can wait until the morning or over the weekend unless you are very uncomfortable and need to call us immediately.
  7. There are many shapes and sizes of pessaries. Sometimes we are not able to find the exact fit, but we will work with you to find the best fit.

### **When should I call for help?**

Call us if you have:

- itching
- redness
- a change in the odor
- red bleeding that is more than a few spots that you may see with pessary removal

### **What is the contact information?**

- Between 8 am and 5 pm Monday- Friday, call the nurse at the clinic where you went to see your doctor. Clinic phone numbers are:
  - Taubman Clinic and Livonia Clinic: (734) 936-7030
  - At night or on the weekend call (734) 936 - 6267 and ask for the urology resident on call. There is always someone on call to help you.

- Figures 1-3, 5-6. WikiHow. [How to Insert a Pessary](#). (CC BY-NC-SA 3.0)
- Figure 4. © 2009. The Regents of the University of California.  
[http://coe.ucsf.edu/wcc/print\\_pessaries.html](http://coe.ucsf.edu/wcc/print_pessaries.html)

Disclaimer: This document contains information and/or instructional materials developed by Michigan Medicine for the typical patient with your condition. It may include links to online content that was not created by Michigan Medicine and for which Michigan Medicine does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan.

Patient Education by [Michigan Medicine](#) is licensed under a [Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International Public License](#). Last Revised 05/2019