

For the majority of medical history, vaginas have been ignored. The reason for that is, in the majority of the societies, until lately, it was seen wrong for a man to touch the genital of a woman if they are not married. Also, because medicine was commonly practiced among men, the data that doctors had about vaginas and vulvas mostly emanated from stories that midwives and their wives mention to them.

Also, when sexual morality loosened, medical understanding about the bodies of women was slow to develop. In a society that is male-dominated, there was a small interest in female experience, sexuality or agony. During the 1930s, the majority of the doctors still assumed that vaginas were completely full of dangerous bacteria. It is not a surprise that even presently there's a lot of pseudosciences, deceptive knowledge, and shame when we talk of vulvas and vaginas. Nowadays, a lot of companies vigorously gain from this fog of false information by marketing questioning vaginal health and hygiene products to women.

The best method to not fall in the trap of the vagina deceit formed by the patriarchy and "Big Feminine Hygiene," is to support yourself with evidence. This book Vagina Bible is your evidence-based path to the science of vulvas and vaginas, gathered and explained by an ob-gyn with more than 20 years' experience. Fortify yourself with understanding and take charge of your body, health, as well as sexuality!

Chapter 1 - On the outside is the vulva, on the inside is the vagina, and the clitoris spreads through both.

If you already understand a little about vaginas, then you most likely understand that "vagina" is just part of the story. Firstly, having a vagina doesn't make you a woman, and not every woman has a vagina. Just in the United States, there are more than a million transgender people who don't identify with the sex they were given at birth on the foundation of their genitals.

Secondly, "vagina" basically just means the inner part of this genitalia. The outside part, which is everything that gets in contact with the clothes, is the vulva.

The vagina is a tube of muscles that links the vulva to the cervix. It's lined with a specialized lubricated skin known as the mucosa. Mucosa cells are filled with sugar that nourishes the good bacteria in the vagina, most particularly the lactobacilli. Lactobacilli produce lactic acid, which maintains the PH of the vagina at a healthy 3.5 to 4.5. The discharge that the majority of women frequently see in their underwear is a combination of lactobacilli, dead mucosa cells and tiny amounts of fluid that get into the vagina through the bloodstream – and it's completely normal.

Beneath the mucosa is the vaginal smooth muscle, which enables the vagina to stretch when penetrated or when delivering a baby. Also, we have the pelvic floor muscles, which enclose around the vagina and vaginal opening. They assist with continence and stability and they contract when you get an orgasm.

The vulva is made up of the mons, which is the fatty pad underneath your pubic bone; the inner and outer labia, which encloses the vaginal opening; and the clitoris. The fat and pubic hair of the mons and the outer labia majora defend the vaginal opening, whereas the inner labia minora doesn't have hair and more sensitive. They can differ hugely in shape or size, between the range 1 to 5 cm or more.

All the aspects of the vulva are erectile, which means they are full of blood and increase when you're aroused. On the other hand, the clitoris is the only structure in the human body intended solely for sexual pleasure.

The clitoris is pretty larger than it seems. It has a shape like a Y; however, with four arms rather two. The only visible aspect is the tip of the Y– that's the small button guarded by the clitoral hood close to the top of the vulva. The clitoral root links that button to the crura, the outside arms of Y that goes under the labia majora, and the clitoral bulbs, the inside arms links to the vagina and the urethra.

Now that you've known about the different parts of your vagina and how they are linked, let's explore how to best take care of them.

Chapter 2 - There is no medical cause to clean your vulva, and your vagina doesn't even need to be cleaned.

What's the routine of your vagina?

This might seem like a senseless question; however, there is an ever-growing market for soaps, wipes and, creams for your vulva and vagina. Companies profit millions of dollars with products that assure to make the genitals better, cleaner and healthier. However, from a medical perspective, there is no cause to soap, wipe or cream your vagina whatsoever – it's a self-cleaning oven! As a matter of fact, a lot of cleaning can be really destructive.

Therefore, which kinds of vulvar and vaginal care are allowed, and which ones are best to evade?

Let's begin with the vulva. Except you have fecal or urinary incontinence, cleaning the vulvar skin is not essential; however, some women like the feeling of freshness that accompanies it. If you're part of those women, make use of a cleanser that has a pH of about 5.5, which is close to that of the vulvar skin. Try not to use soaps that have a high pH and irritating fragranced products. After cleaning, avoid using hairdryer – your vulva prefers to remain moist! For instance, if your vulva skin is dry, as a result of menopause, you can use a mild moisturizer. One-ingredient household products, like coconut oil and petroleum jelly, work perfectly.

Your pubic hair is there to guard your vulva and vagina. It traps moisture and serves as an obstruction to dangerous substances. If you're one of the numerous women who take out some or all of it, attempt to do that in a manner that leads to a slight skin-tearing and irritation. The safest medical suggestion is a trimmer; however, shaving and waxing are also okay if done with the appropriate method.

The key instruction for vagina maintenance is this: Do. Not. Douche. Up 'til the 1970s, doctors suggested vaginal douching for anything such as odor to yeast infections. Presently, a lot of studies have revealed that douching causes destruction on your vaginal ecosystem. Even when you do it with just water, it allows your vagina to be even more susceptible to bacterial imbalances and increases your risk of having an STI.

Lastly, you may be shocked to discover that what you consume has a small effect on your vagina. For instance, no food – not even the notorious pineapple – can give your vagina smell or taste different. There is basically no straight medical association between your gut and your vaginal microbiome. But, your vagina will be grateful to you for a balanced diet that contains lots of fiber, just as the remaining part of your body does.

Chapter 3 - Orgasms are produced by clitoral stimulation, and a penis is not the most certain means to get one.

Sex is one of the best fun things you can do have with a vagina, and the more you as well as your partner understand about how your vagina functions, the more fun you'll get.

The blood flow to your vulva and vagina increases when you are aroused sexually. The mons, labia, and clitoris will be increased and extra-sensitive. If they're stimulated in the appropriate manner for the accurate quality of time, you might get an orgasm.

There are a lot of myths that surround the “mysterious” female orgasm; however, the process is really quite easy: an orgasm is the rhythmic contraction of the pelvic floor muscles, usually about 3 to 15 times. It's just a reflex, an involuntary reaction to clitoral stimulation.

Since Sigmund Freud male doctors have spread myths of “vaginal orgasms” and the secret “G-spot.” However, up till now, no high-quality study has discovered proof that any of those things are real. The things these doctors were talking about were probably only the works of the good old clitoris. Bear in mind that the clitoris is a very large structure that's linked to the labia, inner vagina, and urethra. That's is the reason you can touch nearly anything down there, inside or outside, and the sensation will regularly one way or the other end up in your clitoris.

Different to what some men might need you to accept as true, a penis is totally not the best or the only path to orgasm. Just know that 86% of lesbian women state that they regularly or come all the time during sex, however just 65% of heterosexual women can mention the same thing. For the majority of women, only penetration basically does not offer adequate clitoral stimulation for an orgasm. They require extra fingers or toys to offer adequate sensation.

When vaginas are stimulated some of them can ejaculate or squirt. The ejaculate arises from a pair of glands known as Skene's glands, which is found on either side of the urethra and can release a small quantity of fluid when stimulated. Larger quantities of fluid ejaculated during squirting arise from the bladder, which for some women fills up and ejaculates during sex.

Remember that pretty few vaginas usually do such things; therefore yours isn't defective if it doesn't do that. Also, you are not impaired or "prude" if you require a lubricant to enjoy sex. See sex more like a party: it doesn't mean if you went to the party by cab or bus if you were invited by email or card –the only thing that matters is you were there and had fun!

Chapter 4 - Your period is the outcome of a complicated connection between your brain and your ovaries.

Menstruation is the shedding of the uterus' lining that occurs when you didn't fall pregnant during your previous menstrual cycle. The entire process is thoroughly timed and planned by your brain and ovaries.

At the start of your cycle, your brain and pituitary gland produce hormones as part of a series of events that say to your ovaries to begin developing eggs. The developing eggs release estrogen, which enables the lining of your uterus' to thicken. When the levels of estrogen are high enough, the pituitary gland produces a different hormone to activate ovulation and send the eggs down your fallopian tubes to the uterus.

The tissue that remained in the ovaries releases progesterone, which is the hormone that stabilizes the uterus' lining to offer the eggs an opportunity to be fertilized; however, it can do that for just 14 days. When progesterone levels reduce once more, it makes the uterus lining to decrease. This is when you begin to bleed. The first day you see blood is already the first day of your new cycle.

A lot of women experience their first period between the age of 12 or 13 years, and for the majority, it regularly lasts three to seven days. Aside from blood, which can be any type of color

from bright red to black, you can also see tissue and discharge. Averagely, women lose 80 ml of blood during a period; however, the real quantity can vary from 13 to 217 ml.

Selecting a menstrual product that suits you is determined by how you bleed and what you're very comfortable with. The most normally used products are pads; however, it's better to evade fragranced ones that can cause irritation for your skin. For a lot of women, tampons are the go-to selection on heavier days.

There's still lots of panic about the view that a tampon can cause death if it's left for a long time. This dates back to the late 1970s when Procter & Gamble produced a defective tampon known as Relay that seriously increased the risk of having Menstrual Toxic Shock Syndrome, or mTSS, a risky and possibly deadly reaction to bacterial toxins. The relay was removed from the market a long time ago, and in 2015, just 47 women in the United States were affected by mTSS. However, although the risks of having it aren't usually high, it's still a good thing to change your tampon frequently and make use of the smallest size needed to get the work done.

Finally, it's a good notion to try out different menstrual products – experience is the best method of knowing the one that suits you.

Chapter 5 - Pregnancy, childbirth, and menopause all of which will adjust your vulva and vagina.

Your body gets old and changes, even your vagina, and vulva does that too. Still, a lot of women are surprised at the things that occur to their bodies during such huge incidences such as childbirth or menopause. As a society, we are quite quiet about these uncomfortable matters.

When you get pregnant, changes to your vulva, vagina, and cervix will occur as soon as four weeks after conception. The blood flow to your vagina increases, your hormones will change as well and your sex drive might fall. For reasons that are unknown, yeast infections are more frequent during pregnancy. Also, about 10 and 30% of women get infected with a kind of vaginal bacteria known as group B streptococci. Since these bacteria can cause damage to your baby,

healthcare providers do a routine test for streptococci in the third trimester and treat it with antibiotics if need be.

Childbirth will have a serious effect on your vagina as well, however temporarily. About 79% of women have some type of tearing during vaginal delivery. This seems scary; however, bear in mind that the vagina has developed to stretch, tear and heal. Trauma is a typical aspect of childbirth and it differs greatly in severity. Sometimes tearing needs stitches, and sometimes it will heal by itself.

How do you get yourself ready for the trauma of childbirth?

There is some good proof that perineal massages –that is massaging between the vaginal opening and the anus –during the weeks before and during birth can minimize tearing during delivery. Although, shaving or cleaning the vulva with an antiseptic before delivery, are obsolete practices that we are now aware will have no impact on you or your baby's health.

For numerous weeks after childbirth, swelling, bruising, discharge, constipation and even hemorrhoids are usual. Ice packs, baths, and medicine like ibuprofen and NSAIDs can assist with the pain. A lot of doctors suggest waiting four to six weeks after vaginal delivery before you start having sex again.

Menopause is another natural process that will change your vulva and vagina. Menopause means the period when a woman stops menstruating. This is usually around age 50 and is accompanied by an intense reduction in the hormones estrogen and progesterone. Also, vaginal tissue can shrink and become less elastic, which is known as the genitourinary syndrome of menopause, or GSM.

General symptoms include hot flashes, vulva irritation, and vaginal dryness. Some women are so lucky that don't experience any of these symptoms, whereas others experience all of it. Luckily, the majority of them can be treated effectively by using vaginal estrogen creams or patches, pills or rings.

Chapter 6 - STIs like HPV, herpes, and chlamydia are more prevalent than you assume and they can be treated and prevented.

Nearly all women that are sexually active will contract an STI at least once in her lifetime. It's not a thing to be embarrassed about! A lot of STIs are simply treatable. Although, if they remain untreated, they can lead to infertility and cancer and increase the risk of having HIV. This is the reason why routine STI screenings, particularly for young people, are essential. In most nations, your local health department can assist you to get tested at a low cost and anonymously.

The most popular STI in the world is the human papillomavirus or HPV for short. More than 80% of women will have it in their lifetime. As a matter of fact, if you've had sex before, you've most definitely come in touch with HPV. The majority of the HPV types are symptomless; however some can lead to genital warts or even cervical cancer, and that is the reason you should get tested regularly.

Incredibly, there is a very effective and safe vaccine against HPV. The vaccine just works if you've never had or been in contact with the virus before; therefore, it's best administered to girls between the ages of nine and twelve, before their first sexual experience.

As with HPV, nearly everybody also has some kind of herpes virus in their body, and the majority of them inflict small harm. The two sexually transmitted kinds are HSV-1, which normally affects the mouth, and HSV-2, which normally affects the genitals. The difficult thing about herpes is that it can be latent, meaning the virus can remain inactive in your body for a long period and then unexpectedly reappear. But, once discovered, herpes outbreaks can be effectively handled with medication.

Other prevalent bacterial are STIs Gonorrhea and chlamydia. They are normally symptomless; however, can cause severe infections if they remain untreated. Both of them can be managed with antibiotics; however, the gonorrhea virus is becoming progressively resistant to a lot of them.

When used appropriately, condoms are the most effective means to protect yourself from these STIs. They offer a physical obstruction in which the viruses can't pass through. However, although just 2% of condoms break when tested, close to 29% of them break or slip under real-world circumstances. That's is the reason why you should ensure that the one you're using hasn't expired and that you've used it correctly with the right side facing out. Also, you need to leave some space at the tip for ejaculate and use a lubricant to avoid tearing. A good condom method will be effective.

Chapter 7 - Although yeast infections and bacterial vaginosis are the most popular vaginal disorders, they are usually misdiagnosed and misinterpreted.

The most popular complaint about people that have a vagina is most certainly yeast infection.

Yeast is a kind of single-cell organism, and fairly a few yeast species stays on your body without ever inflicting harm. As a matter of fact, a little vaginal yeast is okay. However, when yeast overgrows, it can lead to redness, itching, and pain, which by then we can now call it a yeast infection. The reasons for that kind of overgrowth are not clear; however, a weak vaginal microbiome, immune system problems and low levels of iron are all likely causes of it.

Approximately 70% of women have a yeast infection at least once in their lifetime, and for the unlucky 5 to 8%, that infections are a recurring problem. The most prevalent species for yeast infections is the *Candida albicans*, although non-candida species are emerging. Yeast infections are really popular; however, that doesn't signify that they're simple to diagnose: more than 50% of women who self-diagnose with a yeast infection essentially have a different issue.

This is the reason why it's essential to speak to your doctor and get tested if you suspect a yeast overgrowth. As soon as you've been accurately diagnosed, a very effective class of drugs known as azoles is present to treat the infection. Drugs are important– there isn't any medical evidence of the effectiveness of home medications like tea tree oil, garlic or special diets.

A different kind of bacterial imbalance is bacterial vaginosis, or BV, which is caused by a decrease in lactobacilli and an overgrowth of “bad” bacteria. This changes the vaginal pH and can lead to pain, itching, and odor. Its actual causes are still not clear; however, it’s essential to diagnose and treat BV since it increases the risk of STIs and pelvic inflammatory disease. Unluckily, the drugs that are presently available just kill the bad bacteria; the drugs don’t increase lactobacilli. Using probiotics with lactobacilli in them might be an assuring solution, although there is still no strong research on their effectiveness.

There’s proof that using condoms can protect you not only from STIs; however, it also protects you against BV. The reason is that penetrative sex introduces foreign bacteria and substances into your vagina that can be a negative effect on vaginal ecosystems. Condoms defend your good bacteria. However, be cautious – if the condoms you use have spermicide, which is a powerful chemical made to kill off and reduce sperm, they as well can disrupt your vaginal ecosystem.

Chapter 8 - You can make your vagina healthy with routine screenings, seeing your doctor and doing informed online research.

Although the vagina doesn’t require a lot of cleaning, vaginas do require some care.

If you’re already having sex, routine STI testing is compulsory. Also, yearly screenings for cervical cancer are a good idea, since its the fourth most leading cancer in women of reproductive age. If you detect any symptoms like itching, burning, and pain, you should regularly consult a doctor – even when you believe you know what is wrong! Have it at the back of your mind that, about 70% of women who self-diagnose a yeast infection really have something totally different.

Unfortunately, the vulva and vagina have limited methods of interacting with us; therefore, the indications they give can be confusing.

In order to assist your doctor help you, you need to explain your symptoms as precisely as possible. For instance, if you experience pain in your vagina, do you feel the pain in your lower or upper vagina? Does it hurt every time or just during sex? Is it a stinging or a burning sensation? With your brand-new medical understanding, explaining your vaginal and vulvar changes fully shouldn't be an issue. Accuracy will assist your doctor do the right tests, provide the correct diagnosis, and looks a treatment that suits you.

Definitely, you might be tempted to first check Google before consulting with a doctor, and researching vagina-related problems online is a totally right thing to do. Just remember that on the internet, factual medical detail is regularly buried under sexist misinformation, obsolete household remedies or strategic fear-mongering from companies attempting to sell things to you.

This is the reason why it's essential to be careful when you check online. Verify your sources, finish every article and jump the comment section. The United States National Library of Medicine is an excellent resource where you can begin searching for medical information. Also, they have an online tutorial known as Evaluating Internet Health Information, this will teach you how to know which health claims are evidence-based and which one is false.

Let's say you're researching for hygiene or wellness guidelines, be cautious of companies making use of terms like "pure," "natural" or "detoxifying" to brand their products. Although wellness can be a good means to relax and destress, these terms have no tangible meaning when we talk of medical safety or effectiveness. Keep in mind that the general advice for what to use for your vulva and vagina is: as slight as possible.

Just follow the few basic prevention and maintenance guidelines you have learned in this book, and you'll make your vagina healthy and happy!

The Vagina Bible: The Vulva and the Vagina—Separating the Myth from the Medicine by Jennifer Gunter Book Review

Your vulva and vagina are healthier and more sound than patriarchal marketing and vagina-shaming wellness companies want you to consider. They require small cleaning and upkeep, and every change they experience during your life, as well as during pregnancy, menopause, or when you're managing an STI, are typically perfectly natural. Definitely, it's essential to speak to your doctor if you feel actual distress or disturbing symptoms. In particular, though, the healthiest thing you can do for your vagina is to understand it very well, in order for you to provide it the maintenance it requires.

Quit smoking!

Quitting smoking is the easiest and most effective health instruction modern medicine has to give, and no wonder your vagina will be grateful for it as well. Smoking is related to higher risks for a lot of vagina-related health issues like BV, painful periods and menopause symptoms – the earlier you can substitute your cigarettes for carrot sticks, the better.

<https://goodbooksummary.com/the-vagina-bible-by-jennifer-gunter-book-summary/>