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Kegel exercises.

Pelvic floor exercises recommended for urine leakage, after prostate surgery and for premature ejaculation. Follow along with the timer and track your progress.

What are the pelvic floor muscles and why train them?

The pelvic floor is the layer of muscle that supports the bladder, bowel and, in women, the womb from below, and closes the urethra and back passage to prevent leaks. Age, pregnancy and childbirth, prostate surgery, long-term constipation or coughing and excess weight can weaken it. Like any other muscle, it gets stronger with regular training, and that is what Kegel exercises do.

How do I find my pelvic floor muscles?

Sit or lie comfortably and relax your thighs, buttocks and tummy. Imagine you are trying to stop yourself passing wind and, at the same time, trying to hold in urine. You should feel a squeeze and a lift inwards and upwards.

For men

When you squeeze the right muscles, you feel the base of the penis draw in slightly and the testicles lift a little. Standing in front of a mirror, you may see the penis move slightly.

For women

You should feel a squeeze and lift around the vagina and back passage. If you place a clean finger in the vagina, you should feel a gentle squeeze around it.

Is stopping the flow of urine a good exercise?

No. Stopping the stream once while passing urine can help you recognise which muscles to use, but do not do it as a regular exercise. Repeatedly interrupting the flow can disturb the bladder's normal emptying pattern and may leave urine behind. Do your exercises with an empty bladder, when you are not passing urine.

How do I do a Kegel exercise correctly?

- Start lying on your back or sitting; once your muscles get stronger, practise standing as well.
- Squeeze the muscles inwards and upwards while you keep breathing normally.
- Let go and feel the muscles relax fully. Relaxing is as important as squeezing.
- Your lower tummy may draw in slightly, but do not press with your buttocks, thighs or abdominal muscles.

What are the most common mistakes?

- Holding your breath
- Bearing down instead of lifting up, which strains the pelvic floor instead of strengthening it
- Squeezing with your buttocks, thighs or tummy
- Squeezing again before the muscles have fully relaxed
- Doing far more repetitions than recommended and tiring the muscles
- Giving up after a few weeks, before results can be expected

What should a daily Kegel routine look like?

The routine below is based on the NICE guideline in England (at least 8 contractions three times a day for at least 3 months) and the slow-and-fast programme used by NHS physiotherapy departments:

- Slow holds: squeeze and hold for as long as you can, up to 10 seconds, then relax for the same time. Repeat up to 10 times.
- Quick squeezes: squeeze strongly and let go straight away, about once a second, up to 10 times.
- Do both three times a day (for example morning, midday and evening).
- Get into the habit of squeezing just before you cough, sneeze or lift something heavy.
- Keep going regularly for at least 3 months; clear improvement often takes 3–6 months. After that, keep up one set a day to maintain the benefit.

12-week tracking chart

Tick a box each time you complete a set. Your ticks are stored on this device only. You can print the chart and keep it somewhere you will see it every day.

Week	Start date	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7	Longest hold (s)
		M D E	M D E	M D E	M D E	M D E	M D E	M D E	
1		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
2		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
3		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
4		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
5		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
6		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
7		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
8		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
9		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
10		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
11		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	
12		☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	☐ ☐ ☐	

M = morning, D = midday, E = evening set

This page is for information only and does not replace diagnosis or treatment. If you have urine leakage or pelvic symptoms, see a doctor so the cause can be assessed. After surgery, follow the instructions of the doctor who operated on you.