

Gait may be associated with orgasmic ability

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A new study found that trained sexologists could infer a woman's history of vaginal orgasm by observing the way she walks. The study is published in the September 2008 issue of *The Journal of Sexual Medicine*, the official journal of the International Society for Sexual Medicine and the International Society for the Study of Women's Sexual Health.

Led by Stuart Brody of the University of the West of Scotland in collaboration with colleagues in Belgium, the study involved 16 female Belgian university students. Subjects completed a questionnaire on their sexual behavior and were then videotaped from a distance while walking in a public place. The videotapes were rated by two professors of sexology and two research assistants trained in the functional-sexological approach to sexology, who were not aware of the women's orgasmic history.

The results showed that the appropriately trained sexologists were able to correctly infer vaginal orgasm through watching the way the women walked over 80 percent of the time. Further analysis revealed that the sum of stride length and vertebral rotation was greater for the vaginally orgasmic women. "This could reflect the free, unblocked energetic flow from the legs through the pelvis to the spine," the authors note.

There are several plausible explanations for the results shown by this study. One possibility is that a woman's anatomical features may predispose her to greater or lesser tendency to experience vaginal orgasm. According to Brody, "Blocked pelvic muscles, which might be

associated with psychosexual impairments, could both impair vaginal orgasmic response and gait." In addition, vaginally orgasmic women may feel more confident about their sexuality, which might be reflected in their gait. "Such confidence might also be related to the relationship(s) that a woman has had, given the finding that specifically penile-vaginal orgasm is associated with indices of better relationship quality," the authors state. Research has linked vaginal orgasm to better mental health.

The study provides some support for assumptions of a link between muscle blocks and sexual function, according to the authors. They conclude that it may lend credibility to the idea of incorporating training in movement, breathing and muscle patterns into the treatment of sexual dysfunction.

"Women with orgasmic dysfunction should be treated in a multi-disciplinary manner" says Irwin Goldstein, Editor-in-Chief of *The Journal of Sexual Medicine*. "Although small, this study highlights the potential for multiple therapies such as expressive arts therapy incorporating movement and physical therapy focusing on the pelvic floor."

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