

Chart 1 - Results obtained in relation to the evaluation methods, groups, results and main conclusions.

Author/Year/ Country	Objective	Assessment methods	Groups of Intervention	Conclusions	#
Yaraghi et al. [18] 2019 Iran	To compare the effectiveness of pelvic floor muscle physical therapy with the treatment of local injection of botulinum toxin in the sexual function of women with primary vaginismus.	Evaluation: - Sexual function: Questionnaire FSFI - Ability to have sex: Personal reports, home visits, follow-up by phone with a trained specialist. Method: Pre and post treatment application.	Total: n= 58. BG (Botox): n= 28. PG (Physical therapy): n= 30. Physical therapy Intervention: Treatment with PFM relaxation exercises, FES in analgesic frequencies, massage in the perineal region associated with IR light and desensitization. Frequency: 3x week. Duration: 12 weeks.	The results of this study showed a total of almost 75% success rates in the two therapeutic methods evaluated, with a decrease in the frequency of sexual dysfunction in both groups. Physical therapy with desensitization and electrical stimulation techniques (FES) had a higher success rate in all FSFI domains ($p = 0.008$) compared to treatment with botulinum toxin ($p < 0.001$). Some aspects did not show statistically significant differences, being duration of response to treatment ($p = 0.37$) and successful sexual intercourse ($p = 0.014$).	21 75%
Aslan; Yavuzkır Baykara. [19] 2020 Turkey	Compare how successful rates of therapy for vaginismus using dilators or digital relaxation technique (one finger).	Evaluation: - Sexual function: Questionnaire FSFI. Method: Application before and after 3 months of treatment.	Total: n= 62. FG (Fingers) n= 30. DG (Dilator) n= 32. Intervenções: Initial demonstration and home guidance on the intervention. FG was self-administered, followed by application of the spouse and subsequent attempt at sexual intercourse. DG was instructed to increase the diameter of the dilator weekly. Frequency: Daily - 10 to 15 minutes. Duration: 12 weeks.	The mean change in FSFI scores comparing pre and post treatment in both groups was statistically significant ($p < 0.001$). The largest difference was analyzed on the FSFI scale after treatment. In the FSFI subscale scores, the domains desire ($p = 0.026$) and orgasm ($p = 0.017$) of the group that performed the intervention with dilators indicated a more considerable improvement in sexual function. During treatment there were 5 dropouts with intervention performed with dilators and 13 dropouts with intervention performed manually.	19 67%

<p>Zarski et al. [20]</p> <p>2017</p> <p>Germany</p>	<p>To evaluate the acceptability and effectiveness of an online intervention for vaginismus composed of self-help associated with physical therapy techniques for relaxing the PF muscles and using vaginal dilators.</p>	<p>Evaluation:</p> <ul style="list-style-type: none"> - Sexual function: Questionnaire FSFI - Satisfaction questionnaire - Questionnaire about Fear of sexual relations: Questionnaire Dyadic Coping Inventory. Method: Pre-treatment application, after 10 weeks and after 6 months of initial treatment (randomization). 	<p>Total: n= 77.</p> <p>GC (Waiting list): n= 37.</p> <p>GI (Physical therapy): n= 40.</p> <p>Intervention: Treatment of 10 sessions composed of two sessions with psychoeducation modules, one session with relaxation exercises, one session with cognitive restructuring, one session with body exposure, one session with desensitization exercises, two sessions with gradual exposure using finger insertion exercises and/or dilators and, finally, two sessions with exercises to prepare for a sexual relationship or partner.</p>	<p>For female sexual function, there were no significant differences between groups, with the exception of increased satisfaction in the control group. In total, 34.48% of participants in the IG were able to have sex compared to 20.69% in the CG. The chances of penetration of sexual intercourse were 2.02 times higher for participants in the IG compared to those in the CG. Participants who adhered to the protocol and completed all 10-treatment sessions showed significantly greater improvements than those who did not have penetration in the relation, comparing the first and last in relation to general sexual functioning, arousal, orgasm, satisfaction and pain. The IG observed greater chances of penetration in sexual intercourse for younger participants, with lower levels of education and with more sexual desire, and was less effective for participants with greater dyadic coping with the situations involved in the relationship. Most of the participants were satisfied with the online intervention.</p>	<p>20</p> <p>71%</p>
---	---	---	---	--	------------------------------------

BG = Botox Group; DG = Dilator Group; FES = Functional Electrical Stimulation; FG = Fingers Group; FSFI = Female Sexual Function Index; GC = Group control; IG = Intervention group; IR = Light Infra-Red; PF = Pelvic Floor; PFM = Pelvic Floor Muscles; PG = Physical therapy Group; # = Check list Downs and Black.