DR. MATLOCK'S

Va-Jay-Jay

WEIGHT TRAINING PROGRAM

A 12-Week Progressive Pelvic Floor Strengthening Protocol

25g	35g	50g	65g	80g	100g

Progressive Weight Sequence

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■■ BEFORE YOU BEGIN — PHYSICIAN CLEARANCE REQUIRED

Before starting this or any new exercise program, you must consult with a qualified healthcare professional. For pelvic floor training specifically, we strongly recommend one or more of the following providers:

- **Your OB/GYN or Primary Care Physician** — to rule out contraindications and obtain general medical clearance.
- **A Urogynecologist** — a specialist in female pelvic medicine who can assess pelvic organ support and bladder function.
- **A Pelvic Floor Physical Therapist (PFPT)** — a licensed physical therapist with specialized training in pelvic floor assessment and rehabilitation. A PFPT can perform an internal pelvic exam, assess your baseline muscle strength and coordination, identify hypertonic (too tight) vs. hypotonic (too weak) patterns, and guide your starting weight and progression safely.

This program is designed for women with a hypotonic (weak/lax) pelvic floor seeking strength and tone. It is NOT appropriate for women with pelvic pain, vaginismus, pelvic organ prolapse, or active infection.

About This Program

The Va-Jay-Jay Weight Training Program applies the same fundamental principle that drives every elite athletic training protocol — **progressive overload** — to the pelvic floor. Just as a bicep grows stronger when challenged with progressively heavier resistance over time, the levator ani, pubococcygeus, and associated pelvic floor musculature respond to systematically increasing load with measurable gains in strength, tone, contractile force, and endurance.

Developed and refined by David Matlock, MD, FACOG at Visthetic Surgery Institute & MedSpa in Beverly Hills — this 12-week protocol uses FDA-cleared vaginal training weights (kegel balls / ben wa balls) in a structured progression from 25 grams to 100 grams, systematically building pelvic floor strength across six progressive phases.

Clinical benefits of a strong, well-toned pelvic floor include: improved vaginal tone and friction during intimacy; reduced symptoms of stress urinary incontinence; improved core stability and posture; enhanced sexual sensation and orgasmic intensity; and improved recovery following vaginal delivery.

Equipment Required: A graduated set of vaginal training weights. Recommended weights: 25g, 35g, 50g, 65g, 80g, 100g. Ensure all weights are body-safe silicone or medical-grade materials with a retrieval cord. Clean per manufacturer instructions before and after each use. Do not use glass, metal, or non-body-safe materials.

12-Week Program Overview

PHASE	WEEKS	WEIGHT	SESSIONS/WEEK	DAILY SETS	FOCUS
Phase 1	1–2	**25g**	3x	2 sets	Activation & Neuromuscular Patterning
Phase 2	3–4	**35g**	4x	3 sets	Foundation Building
Phase 3	5–6	**50g**	4x	3 sets	Intermediate Strength
Phase 4	7–8	**65g**	5x	3 sets	Advanced Loading

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Phase 5	9–10	**80g**	5x	4 sets	High-Load Endurance
Phase 6	11–12	**100g**	5x	4 sets	Maximum Strength
Maintenance	Ongoing	**100g**	3x	3 sets	Sustain Gains

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How to Perform Each Exercise

1. Weighted Kegel Contraction (Primary Exercise)

Insert the weight as directed by the manufacturer. Stand upright with feet hip-width apart. Contract your pelvic floor muscles upward and inward — as if lifting the weight internally — and hold for the prescribed duration. Release fully and completely between repetitions. The full release is as important as the contraction. Do not hold your breath; breathe normally throughout.

2. Active Weight Retention — Standing Walk

After insertion, walk slowly for 10–15 minutes while contracting enough to retain the weight. This is an active endurance exercise. If the weight falls, simply reinsert and continue. Progress to stair climbing as strength improves.

3. Pelvic Floor Flutter Contractions

Rapid, rhythmic contractions of the pelvic floor (approximately 1 second on / 1 second off) performed with the weight inserted. These target the fast-twitch muscle fibers of the pelvic floor and are introduced beginning in Phase 3.

4. Bridge with Kegel (Advanced)

Lie on your back with knees bent, feet flat. Perform a kegel contraction, then lift your hips into a glute bridge. Hold the bridge for 5 seconds while maintaining the pelvic floor contraction, then lower slowly. Introduced in Phase 4.

5. Squat with Retention (Advanced)

Insert weight. Perform a slow bodyweight squat while contracting to retain the weight. The pelvic floor must work against gravity during the descent. Introduced in Phase 5.

> **Rest Days Are Mandatory.** The pelvic floor is skeletal muscle. It requires recovery. Never train on consecutive days in Phases 1–2. Even in Phases 5–6 (5 sessions/week), at least 2 non-consecutive rest days per week are required. Overtraining the pelvic floor can cause hypertonia, pelvic pain, and paradoxical weakening.

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PHASE 1 — ACTIVATION Weeks 1–2 25g

Phase Goal: Establish neuromuscular awareness and proper contraction-release patterning. Many women have never consciously engaged their pelvic floor. Phase 1 teaches the brain to find and control these muscles with precision.

Week 1

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	2	10	3 sec	30 sec	Weighted Kegel Contraction. Focus on full release between reps.
Wed	2	10	3 sec	30 sec	Weighted Kegel Contraction + 10-min standing walk with weight retained.
Fri	2	12	3 sec	30 sec	Weighted Kegel Contraction. Try to feel the difference between contraction and full relaxation.

Week 2

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	2	12	5 sec	30 sec	Weighted Kegel Contraction. Increase hold to 5 seconds.
Wed	2	12	5 sec	30 sec	Kegel Contraction + 15-min standing walk with retention.
Fri	2	15	5 sec	30 sec	Kegel Contraction. Assess comfort at 25g — ready for 35g in Phase 2?

Phase Tip: Use a mirror to confirm you are not using your glutes or inner thighs. Only your pelvic floor should move. If you cannot retain the 25g weight while standing still, continue Phase 1 for an additional week before progressing.

PHASE 2 — FOUNDATION Weeks 3–4 35g

Phase Goal: Build baseline pelvic floor strength and endurance with increased resistance. Four sessions per week introduces greater training stimulus while maintaining adequate recovery.

Week 3

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	3	10	5 sec	30 sec	Weighted Kegel Contraction at 35g. First session at new weight — assess comfort.
Tue	3	10	5 sec	30 sec	Kegel Contraction + 15-min walk. Focus on posture during walk.
Thu	3	12	5 sec	30 sec	Kegel Contraction. Slow controlled release — 3 seconds down.
Sat	3	12	5 sec	30 sec	Kegel Contraction + 15-min walk. Try light stair climbing if comfortable.

Week 4

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	3	12	7 sec	30 sec	Weighted Kegel Contraction. Increase hold to 7 seconds.
Tue	3	12	7 sec	30 sec	Kegel Contraction + 20-min walk with retention.

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DAY	SETS	REPS	HOLD	REST	NOTES
Thu	3	15	7 sec	30 sec	Kegel Contraction. Assess — do you feel significantly stronger vs. Week 3?
Sat	3	15	7 sec	30 sec	Kegel Contraction + 20-min walk. Stair climbing if cleared.

Phase Tip: At 35g you should feel the weight during standing exercises. If you cannot retain 35g while walking, continue at 25g for one more week. Retention during walking — not just stationary standing — is the readiness marker for Phase 3.

PHASE 3 — INTERMEDIATE STRENGTH

Weeks 5–6 | **50g**

Phase Goal: Significantly increase pelvic floor resistance load. Introduction of flutter contractions targets fast-twitch fibers for improved response speed and sexual function. This is a pivotal phase — many women report first noticeable functional changes here.

Week 5

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	3	12	7 sec	30 sec	Weighted Kegel Contraction at 50g. Assess new weight — 2kg additional load.
Tue	3	12	7 sec	30 sec	Kegel Contraction + 20-min walk.
Thu	3	15	7 sec	20 sec	Kegel Contraction + 10 Flutter Contractions per set (1 sec on/off rhythm).
Sat	3	15	7 sec	20 sec	Kegel Contraction + Flutter Contractions + 20-min walk.

Week 6

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	3	15	10 sec	30 sec	Weighted Kegel Contraction. Increase hold to 10 seconds.
Tue	3	15	10 sec	30 sec	Kegel Contraction + 25-min walk with stair climbing.
Thu	3	15	10 sec	20 sec	Kegel Contraction + 15 Flutter Contractions per set.
Sat	3	15	10 sec	20 sec	Kegel Contraction + Flutter Contractions + 25-min walk.

Phase Tip: Flutters should feel like rapid, small contractions — not full kegels. If you feel pelvic pressure or heaviness at 50g, discontinue and consult your physician. Many women notice improved bladder control beginning in this phase.

PHASE 4 — ADVANCED LOADING

Weeks 7–8 | **65g**

Phase Goal: Challenge the pelvic floor with compound functional movements. Introduction of the Bridge with Kegel integrates pelvic floor strength with gluteal and core function — the foundation of whole-body pelvic health.

Week 7

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DAY	SETS	REPS	HOLD	REST	NOTES
Mon	3	15	10 sec	20 sec	Weighted Kegel Contraction at 65g.
Tue	3	15	10 sec	20 sec	Kegel + Flutter Contractions (15 per set) + 25-min walk.
Thu	3	15	10 sec	20 sec	Kegel Contraction + Bridge with Kegel (10 reps x 5-sec hold).
Fri	3	15	10 sec	20 sec	Kegel + 25-min walk with stair climbing.
Sat	3	15	10 sec	20 sec	Kegel + Flutter + Bridge with Kegel.

Week 8

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	3	15	10 sec	20 sec	Kegel Contraction + 30-min walk.
Tue	3	15	10 sec	20 sec	Kegel + Flutter + Bridge with Kegel (12 reps x 5-sec hold).
Thu	3	15	10 sec	20 sec	Kegel + Bridge + 30-min walk.
Fri	3	15	10 sec	20 sec	Kegel + Flutter Contractions — push intensity.
Sat	3	15	10 sec	20 sec	Full Phase 4 circuit: Kegel + Flutter + Bridge + Walk.

Phase Tip: The Bridge with Kegel should be performed WITHOUT the weight inserted, as a separate exercise in the same session. Insert weight for Kegels and walks; remove for bridge exercises. Core bracing during bridges amplifies pelvic floor engagement significantly.

PHASE 5 — HIGH-LOAD ENDURANCE

Weeks 9–10

80g

Phase Goal: Approach maximum resistance training loads. Five sessions per week demands significant commitment and disciplined recovery. Introduction of Squat with Retention trains pelvic floor against the greatest gravitational challenge of the program.

Week 9

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	4	15	10 sec	20 sec	Weighted Kegel Contraction at 80g + 30-min walk.
Tue	4	15	10 sec	20 sec	Kegel + Flutter Contractions (15 per set).
Wed	4	15	10 sec	20 sec	Kegel + Bridge with Kegel (12 reps x 7-sec hold).
Thu	4	15	10 sec	20 sec	Kegel + 30-min walk with stair climbing.
Sat	4	15	10 sec	20 sec	Introduction: Squat with Retention (10 slow squats per set).

Week 10

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	4	15	10 sec	20 sec	Kegel + Flutter + 30-min walk.

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DAY	SETS	REPS	HOLD	REST	NOTES
Tue	4	15	10 sec	20 sec	Kegel + Squat with Retention (12 reps per set).
Wed	4	15	10 sec	20 sec	Kegel + Bridge with Kegel + Flutter.
Thu	4	15	10 sec	20 sec	Kegel + 30-min walk.
Sat	4	15	10 sec	20 sec	Full circuit: Kegel + Flutter + Bridge + Squat + Walk.

Phase Tip: At 80g you are in elite pelvic floor training territory. Most published kegel research uses 0g (no weight). You are significantly exceeding standard protocols. Listen to your body. Any pain, pelvic pressure, or difficulty removing the weight requires immediate cessation and physician evaluation.

PHASE 6 — MAXIMUM STRENGTH Weeks 11–12 100g

Phase Goal: Achieve maximum pelvic floor strength capacity. The 100g weight represents the pinnacle of progressive resistance training for the pelvic floor. Completion of Phase 6 represents an extraordinary level of pelvic floor strength and discipline.

Week 11

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	4	15	10 sec	20 sec	Weighted Kegel Contraction at 100g. Assess comfort at peak weight.
Tue	4	15	10 sec	20 sec	Kegel + Flutter + 30-min walk at 100g.
Wed	4	15	10 sec	20 sec	Kegel + Bridge with Kegel (15 reps x 7-sec hold).
Thu	4	15	10 sec	20 sec	Kegel + Squat with Retention (15 reps per set).
Sat	4	15	10 sec	20 sec	Full circuit at 100g. Celebrate — this is elite-level training.

Week 12

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	4	15	10 sec	20 sec	Kegel + Flutter + 35-min walk.
Tue	4	15	10 sec	20 sec	Kegel + Bridge + Squat circuit.
Wed	4	15	10 sec	20 sec	Kegel + 35-min walk with maximum stair climbing.
Thu	4	15	10 sec	20 sec	Kegel + Flutter + Bridge — strength peak session.
Sat	4	15	10 sec	20 sec	GRADUATION SESSION: Full circuit. You have completed Dr. Matlock's Va-Jay-Jay Weight Training Program.

Phase Tip: 100g is your maintenance weight. After completing Phase 6, move into the Maintenance Protocol (below) to sustain and protect your gains for life.

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■ MAINTENANCE PROTOCOL Ongoing 100g

After completing Phase 6, you have built a level of pelvic floor strength that requires maintenance — not ongoing escalation. The maintenance protocol is designed to preserve your gains permanently with a sustainable, realistic training schedule.

DAY	SETS	REPS	HOLD	REST	NOTES
Mon	3	15	10 sec	20 sec	Weighted Kegel Contraction at 100g + 30-min walk.
Wed	3	15	10 sec	20 sec	Kegel + Flutter Contractions + Bridge with Kegel.
Sat	3	15	10 sec	20 sec	Full circuit: Kegel + Flutter + Squat with Retention + Walk.

Maintenance Principle: If you miss more than 3 consecutive weeks of training for any reason, return to Phase 5 (80g) for 2 weeks before resuming 100g. Muscle — including pelvic floor muscle — deconditions with disuse. Rebuilding is easier than building from scratch, but detraining does occur.

Ready to take your pelvic floor health further?

Dr. Matlock specializes in Laser Va-Jay-Jay Rejuvenation (LVR), Designer Va-Jay-Jay Surgery, and the full spectrum of Cosmetic Gynecology — for women who want results that go beyond what exercise alone can achieve.

Schedule your private consultation today.

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