

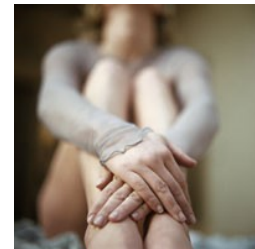


Call us to book a confidential consultation from our nurse specialist.

Labioplasty

Introduction

Labioplasty refers to surgery to the inner lips or folds of skin surrounding the entrance to the vagina also known as the labia minora. Common reasons for labioplasty of the vaginal lips is because the vaginal lips have become saggy, enlarged, stretchy, unattractive, are out of place, or are distorted looking. This may cause a decrease in self-esteem. The sagginess and distortion (which can be mild, moderate, or severe) of the vaginal lips can be due to tearing and stretching that occurs during childbirth. An episiotomy (a cut made at the time of childbirth to create more room to deliver a baby) may heal poorly and can distort the vaginal lips. In addition to childbirth, aging and various types of injuries can cause the vaginal lips to become distorted. Distorted vaginal lips can lead to a rash, irritation, poor hygiene, and feeling uncomfortable in tight clothing or bathing suits. Distorted vaginal lips can cause women to complain of pain during sex and discomfort when doing activities such as jogging or bike riding. Females with vaginal lips of this type may also experience decreased self-esteem and embarrassment with a sexual partner.



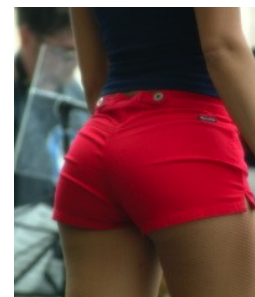
A labioplasty aims to remove extra tissue from the vaginal lips and reduce their size to create a more normal appearance. The lips on the right and left sides can be made to look more even in appearance. A labioplasty can remove tears that occurred during childbirth or over time.

The procedure

A labioplasty is typically performed under general anaesthesia as day surgery. There is usually only minor pain the day of the surgery.

No dressings are needed. Ointment, such as Vaseline or soft white paraffin, is often used on the suture line. You may shower the day after surgery and you should wash the area with soap and water generously at least twice a day. Some mild to moderate swelling usually occurs, which is at its worst in two to three days after the surgery. The swelling quickly disappears over the next three weeks.

There is usually no bruising present, although mild bruising can occur. The stitches are dissolvable along the outer margin of the labia minora and do not need to be removed. For a few days after surgery you may find it difficult to wee. This is due to swelling and usually resolves with time. You can resume normal everyday light activities and work the day after surgery. Intercourse can resume within 7-10 days after surgery. Some women may need 3 to 6 weeks of recovery before they resume intercourse.



Use of tampons should be delayed for 4 weeks. Each type of restriction in activities depends on the individual. Your surgeon will typically see you for several follow-up visits after surgery to make sure everything is healing properly. When the healing process is complete, the lips of the vagina should have a better appearance. Sensation and function of the vagina should be normal, if not improved, after surgery. You should be more comfortable performing daily activities and sexual relations should improve as well. Any signs of the labioplasty should be virtually undetectable after healing is complete.



Alternative treatments

Labioplasty is elective surgery and therefore one has to carefully consider the surgery and balance it against the risks. Alternative treatments not undertake the surgery. If there is pain with clothing or sporting activities these could be modified.

Specific Risks of Labioplasty

Bleeding

If bleeding persists after surgery bruising and swelling can cause pain and restriction of movement. Persistent bleeding may occasionally result in a collection of blood (haematoma).

A collection of blood may require re-operation to drain the blood.

Pain and discomfort

Pain and discomfort is minimal after a labioplasty. Significant pain may be experienced if there is a complication, such as a collection of blood or wound breakdown.

Swelling and bruising

Mild to moderate swelling usually occurs and is at its worst in two to three days after the surgery. The swelling quickly disappears over the next three weeks. There is usually no or minimal bruising.

Wound dehiscence

The suture line may pull apart. This may happen if there is excessive swelling or bleeding or if there is too much activity in the early post-operative period. Healing, in this case, will be delayed and a second operation may be required at a later date.

Infection

Infection is not generally a problem in this area and you are given antibiotics at the time of induction of anaesthesia in an effort to reduce this risk. The risk of infection is less than 3%.

Asymmetry

When healing is complete, the lips of the vagina should have a smoother more even appearance. Perfect symmetry may not be achieved after surgery and in some cases a minor surgical revision may be necessary.

Under or over correction

Rarely the vaginal lips may not have been reduced enough. It may require revisional surgery to achieve further reduction. Over correction cannot be easily corrected.

Scars

There will be scar on the edge of the labia minora. In the majority of cases the scar is not visible and does not cause any pain.

Injury to nerve endings in the pubic or genital area.

Nerve injury as a result of labioplasty surgery is rare. It may result in permanent loss of feeling in the area or constant discomfort during sexual intercourse or while sitting or walking.

After Your Operation

On waking

You will have a pad in the groin.

Discomfort

You can expect to have some discomfort when you wake up after a labioplasty.

Care should be taken when getting out of bed to go home.

Pain relief

You will be given painkillers to take home.

It is recommended that you avoid aspirin or aspirin based products, as they will promote bruising and bleeding.

The usual medications given in the postoperative period consist of panadol, panadeine, panadeine forte, panamax, digesic, and endone. These medications may be combined with anti-inflammatory medications such as vioxx, celebex, or brufen.

Make sure that you have a postoperative pain regime at the time of discharge and that you understand the medications that you are taking and what they are designed to do for you.

Sleeping tablets

One or two sleeping tablets (normison, temazepam, ativan) may be taken at night, if necessary, to help with sleeping in the first few days after surgery.

Other medications

Your surgeon may prescribe a course of prophylactic (preventative) antibiotics.

Nausea and vomiting

Nausea and vomiting may be due to the anaesthetic or post-operative medication (like pain killers or antibiotics).

Medication to prevent nausea and vomiting may be required.

If prolonged, nausea and vomiting may be related to a complication like infection and may cause dehydration. You need to inform your surgeon of prolonged nausea and vomiting.



Bruising

Bruising around the vagina is minimal. Most bruises will resolve by 2 weeks. Gentle massage with a moisturising lotion (sorbolene), or arnica cream may help to dissipate bruising.

Bleeding or ooze

There may be ooze of blood from any of the suture lines.

Any ooze should resolve within 24 to 48 hours. Persistent or offensive ooze should be reported to your surgeon.

Swelling

Swelling can occur for 2 to 3 weeks after labioplasty and sometimes, intermittent swelling may take up to 6 months to settle. Please ask your surgeon how long swelling should take to resolve. Swelling lasting longer than this time may be due to a complication, and should be reported to your surgeon.

Dressings

You will be able to shower after your labioplasty. An antibacterial soap (sapoderm, gamophen) may be recommended. Suture lines should be carefully dried with a clean towel. Antibiotic ointment, paraffin, vaseline or betadaine should be placed along the suture line until the area heals.

Occasionally the suture line may become red and ooze. Your surgeon may prescribe antibiotics as well.

Sutures

Absorbable suture are usually used. Occasionally a suture knot or suture end may become troublesome and may need to be removed before it dissolves.

Travel

A labioplasty is performed under general anaesthesia and can be performed as day surgery.

If you are going home after day surgery a family member or friend must drive you because you have had an anaesthetic and someone should stay overnight with you for the same reason.

If you have any questions about these matters, please speak to your surgeon.

Anaesthetic effects

The effects of an anaesthetic may still be present 24 hours after your procedure, even if you do not feel them. Your reflexes will be slower and you are at risk of injury. It is illegal to drive while under the influence of a drug (even a prescribed one) and you could be charged.

Do not make important decisions or sign legal documents for 24 hours after an anaesthetic. Take care with alcohol intake after surgery because medications and alcohol may interact with the residual anaesthetic. Discuss your normal medications with the anaesthetist.

Readmission to hospital

Rarely you may need to be re-admitted unexpectedly to hospital. The most common cause is persistent nausea and vomiting, anxiety, the need for unexpected additional pain relief or for treatment of unexpected complications of surgery such as bleeding, wound problems or infection.

Activity

Too much activity too soon will risk delays in healing or increase the risk of complications. You may go to the bathroom, walk around the house sit and watch TV, etc., but no matter how good you feel do not clean the house, engage in heavy manual work, go to the gym etc. for 7 days to 4 weeks following your surgery. This also applies to sexual activity.

Sport

Slow walking on the flat for exercise is often therapeutic in the early post-operative period. Your body will dictate whether you are able to safely recommence your exercise program. More strenuous exercise like fast walking, running or swimming may commence after 4 to 6 weeks.

Vitamins

Although not proven, there is some suggestion that multivitamins prior to and after surgery may aid in wound healing. Avoid mega dosing on vitamins prior to surgery.

Smoking

Smoking reduces capillary blood flow to the skin and may result in delays to wound healing or complications of your labioplasty. Smoking not only affects wound healing; it also increases the risk of bleeding, wound infections, post-operative chest infections. Smoking also increases the risk of developing a blood clot in the legs that can travel to the lungs. It is recommended that you cease smoking at least 4 weeks prior to your surgery and for 4 weeks after.

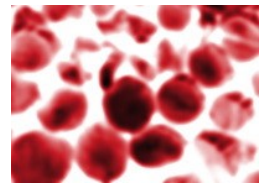
Alcohol

Medications and alcohol may interact with the residual anaesthetic and prescription pain medicine.

Alcohol also dilates blood vessels and may increase the risk of postoperative bleeding.

It is recommended that you restrict your alcohol intake for the first three days after surgery.

Driving



It is recommended that you do not drive for a certain period of time after a labioplasty. To be able to drive safely you must have full use of your reflexes to drive, and any post-operative discomfort will inhibit your reflexes.

Recovery time

You must allow yourself adequate recovery time. You will have restriction to mobility for up to 1 week. Too much activity too soon will increase the risk of complications such as bleeding, infection and delayed healing. It would be wise to ensure you have adequate time off work. You must also allow sufficient time for your body to recover from the effects of anaesthesia and surgery.

Discuss the expected time for recovery with your surgeon prior to your surgery and allow plenty of time for adequate recovery.

Healing

Everyone heals at a different rate. The ability to heal is variable and depends upon a number of factors such as your genetic background, your weight, your overall state of health and lifestyle (exercise, diet, smoking, drinking, etc.). Your attention to preparing yourself for surgery will be manifest in your post-operative recovery. Many people believe the surgeon "heals" the patient. Not one person can make another heal. Your cooperation and close attention to pre and post-operative instructions is extremely important and is in your best interest.

Following instructions

A major factor in the course of healing is whether you follow the instructions given by your surgeon and the nurses in the surgery. Such guidelines are designed to promote the healing process and to prevent the occurrence of anything that may interfere with your recovery. It is imperative that you recognise that you are a partner in this process and have a responsibility to follow instructions carefully. The instructions, based on broad experience, are designed to give you the best opportunity for healing without delay or surprise.



Depression

Depression is a normal reaction to surgery. The third day following your surgery may be the worst. You may be teary.

It is not uncommon to experience a brief period of "let-down" or depression after any surgery.

You may subconsciously have expected to look and feel better "instantly," even though you rationally understood that this would not be the case.

Day 3 post surgery may be the worst.

As healing occurs, these thoughts usually disappear quickly.

If you feel depressed, understanding that this is a "natural" phase of the healing process may help you to cope with this emotional state.

Support from family and friends

Support from family and friends can be very helpful, but because they may not understand what constitutes a normal postoperative course, their comments may unintentionally create emotional turmoil for you.

The staff at the surgery and your surgeon will tell you honestly how you are doing and what to expect.

Please trust in your surgeon's knowledge and experience when your progress is discussed with you.



Complications

Complications are infrequent. When complications occur, it is seldom a consequence of poor surgery or poor postoperative care. Complications are more likely to be a result of the variable healing capacity or a failure to follow post-operative instructions. You will be assisted in every way possible if a complication occurs.

Should the unexpected occur, please understand that it is important to follow the advice of your surgeon and nursing staff in order to treat it as effectively as possible. Your surgeon and the nursing staff will ensure that you have support and assistance during this difficult time.

Appointments

It is very important that you follow the schedule of appointments established for you after surgery. Appointments to see the nurse or the surgeon should be made before or immediately after discharge from hospital. The review appointment may be the next day or up to one week following surgery.

If no appointment has been made, you must ensure that you contact your surgeon and make a follow up appointment. If you have any concerns don't feel that you are bothering the surgeon or the staff.

If need be, you can be seen prior to any arranged review appointment to sort out any concerns.



Revisional surgery

Occasionally the result of your surgery may not be totally perfect. If you feel that you can focus on the overall degree of improvement instead of any small lack of perfection, then you will reap the benefits of the results of your operation. If small imperfections will prevent you focusing on the degree of improvement after your surgery you probably should not have had an operation.

Your surgeon will use their expertise and experience in their surgical techniques to achieve the best results and ensure their patients receive the most advanced surgical techniques available. They keep updated by attending, national and international aesthetic conferences and seminars regularly.

The surgery performed may not necessarily relate to the methods that are sometimes promoted, or advertised in popular magazines, newspaper articles or on television. The rate of revisional surgery, even in the most skilled surgical hands, can never be zero because patient and surgeon can control only some aspects of the outcome. Minor adjustments or additional revisions following cosmetic surgery may be



necessary in up to 5% of patients.

Revisional surgery is performed after the first postoperative year (12 months after surgery) because resolution of swelling and stabilisation of the final appearance takes at least that long. During the first few months after surgery irregularities, asymmetries or poor contours may sufficiently improve without surgery, so very small imperfections following surgery should not be revised.

Revisional procedures are less predictable and involve more risks. You must consider any revisional surgery carefully after discussion with your surgeon.

If revisional surgery is required you may incur further surgical, anaesthetic, pathology and hospital fees. These fees may be covered if you have private health insurance, depending on your level of cover. These fees will be your responsibility and you will need careful financial planning you before you embark on any form of cosmetic surgery. Private Health Insurance is strongly advised for any cosmetic surgery.