



Patient Information Guide

Labiaplasty

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Topics to be discussed with your Surgeon - Things you need to know

1. SURGICAL CONSULTATION

How the operation is performed:

This is performed as a general anaesthetic or under local anaesthetic as a day case procedure i.e. coming in and out of the hospital the same day. On occasion the Surgeon, or you yourself, may feel it is appropriate to keep you overnight.

Anatomy of the Labia Minora:

There is a wide range of what is acceptable as normal. Most women have some form of minor asymmetry, but this can be exaggerated after childbirth, especially if you have had an episiotomy. One side may differ from the other in volume, skin excess. This is entirely normal. Your surgeon will try to adjust this as best he/she can during the procedure, but if minor differences still remain after the operation we accept that it is within normal limits.

The site of the Incision/scar:

Depending on the excess tissues need to be removed the scar is usually placed along the length of the labia minora i.e. along the vaginal opening. If you have excess that includes the clitoris/mons, the scar may need to be extended to cover these areas. Your surgeon will explain this all preoperatively.

The types of Stitches/sutures:

Usually a combination of sutures will be used. Deep sutures under the skin will be absorbable and if sutures are used on the skin they will dissolve too, so no need for any sutures to be removed.

Post-operative issues and risks:

- 1) **Bruising and swelling** – not uncommon for the first 1-2 weeks post op, returning to normal around 6 weeks. A small amount of ooze from the wound is normal and you will need to wear a sanitary towel for the first 1-2 weeks.
- 2) **Antibiotic cream** – we will give you an antibiotic cream, which we want you to apply to the wound 3 times a day for the first week.

Labiaplasty

Continued

- 3) **Urinary symptoms** – you may have mild discomfort or burning when passing urine for the first 24 hours. Continue to drink plenty of water and this will settle.
- 4) **Pain relief and antibiotics:** You will not be allowed home until you are comfortable and pain free. We send you home with three different types of painkillers and a course of oral antibiotics.
- 5) **Bleeding** – this occurs in less than 1% of patients. If it occurs the labia will swell significantly and a steady trickle of blood will come from the suture line. Unfortunately we need to see you and take you back to theatre and cauterize the bleeder.
- 6) **Infection** – this also occurs in less than 1% of patients. It is important to maintain a healthy hygiene regimen showering and drying the area at least 2 times a day for the first 2 weeks.
- 7) **Thrush** – this can occur post op and if you get this infection please see your local pharmacy who will offer you some Canesten® cream/pessaries.
- 8) **Hypersensitivity** – along the scar may occur during the first 6 weeks.

Pre-assessment:

You may require an assessment with the nursing team approximately 1-2 weeks before surgery. This may on occasion be done telephonically, and during this period you will have an opportunity to discuss any aspect of your surgery at that time.

2. PREPARATION BEFORE SURGERY

It is advised that you undertake all of the household duties prior to your admission to hospital, as you will not be able to perform these for a while afterwards. This includes vacuuming, dusting, and clothes washing, ironing and shopping i.e. no pushing, pulling, lifting

DO NOT take any Aspirin or medication containing Aspirin for at least 7 days prior to surgery. (Aspirin may be re-commenced after 48hrs post op.) If you take Aspirin or any other form of blood thinning medication for a medical condition, please discuss with your surgeon.

We routinely give you medication to help bruising and swelling so, I prefer if you do not take Arnica during the period prior to surgery. If you do want to take it please start it at least 24 hours post surgery.

Labiaplasty

Continued

Food and drink

NO FOOD IS ALLOWED 6 HOURS PRIOR TO ANY GENERAL ANAESTHETIC SURGERY, THIS INCLUDES ANY SWEETS/CHEWING GUM. YOU MAY HAVE SMALL SIPS OF CLEAR FLUID (STILL WATER/BLACK TEA/BLACK COFFEE) UP TO 2 HOURS PRIOR TO ADMISSION TO HOSPITAL

3. WHAT HAPPENS ON THE DAY OF THE OPERATION

On arrival you will have routine observations performed and a check of all the relevant paperwork carried out by the nursing staff. Then you will be asked to change into a gown.

All your jewellery must be removed, including ALL metal body piercings. It is recommended that you do not bring anything of value into hospital. All makeup must be removed as it can damage your eyes if left on while you are asleep. You must also remove all nail varnish and acrylic nails.

What will happen when I wake up?

You will find yourself sitting upright, or on your side supported with pillows. You will be allowed out of bed to pass urine (water) with the assistance of the nursing staff the first time, in case you feel lightheaded.

4. AFTER YOUR OPERATION

Travelling – home and afterwards

It is recommended that you do not drive for 14 days following surgery. Someone should be with you overnight for the first 24 hours.

Follow up care

You will need to return to the medical centre after one week. This appointment will be made either at the time of your pre-assessment, or on discharge on the day of surgery at a time to suit you.

At Home

It is important that you have total rest. This means do nothing that will raise your blood pressure, including physical activities, sexual activities and housework during the first 2 weeks. This could induce a bleed, and add to the swelling. You can potter about and undertake activities that do not involve pulling, pushing and lifting.

Labiaplasty

Continued

5. AFTER THE FIRST TWO WEEKS

Start returning to your normal activities of living. Be sensitive to your body and try not to do too much too soon. Therefore, if you experience any pain, stop and try again another day. You can drive and start lifting light objects.

Strenuous gym activities, aerobics or sports should be avoided for four to six weeks.

6. GENERAL INFO /FAQ'S

Am I at risk of infection:

Infection is very uncommon. If you feel unwell, hot, or your breasts appear red, with sensations of burning or there is any discharge, **DO NOT HESITATE TO CONTACT US.**

Will I be in much pain?

It will be uncomfortable over the first few days; this varies from person to person. Analgesia (painkillers) will be prescribed to take home.

breasts. However you may still maintain your bond with a cuddle, but protect your breasts with a pillow or towel. It is recommended that you get help with care for your children during the first 2 weeks of recovery.

Should I adjust my diet?

Maintain a healthy nutritious diet with plenty of fruit and vegetables, as this is important for wound healing and bowels.

Will my procedure affect my bowel movements?

As you are inactive and due to use of painkillers, you may become constipated. For your own comfort and wellbeing, prevent this from happening. Purchase an aperient such as Senokot® or what ever has suited you in the past.

How soon after my procedure can I fly?

If possible avoid flying for the first six weeks, wear flight socks and take low dose aspirin before flying