

## LABIOPLASTY

Labia minora that protrude past the labia majora aesthetically and functionally can be unsatisfactory to women. For both hygiene and/or sexual enhancement, women seek reduction of this redundant tissue.

Dr. Pautler usually performs this surgery in the office under local anesthesia. After reviewing the goals and desires of the patient and marking the extent of tissue removal, Dr. Pautler reviews the surgical plan with the patient. The anesthetic is then administered, the tissue is thoroughly cleansed with an antiseptic and the surgery is then carried out. Punctate bleeders are controlled with gentle cautery and the wound closure is then undertaken with absorbable sutures. After completion, the area is cleansed, dried, and ointment is applied to prevent sticking. A sanitary napkin is used for absorption of any drainage and ice is used externally to curb swelling and any discomfort.

Postoperatively, the area is kept clean and dry with gentle cleansing after using the toilet. Ice can be applied for the first 24-48 hours. The pain is fairly minimal and the area heals within several days. The area will look thick and swollen for a few weeks and then normal-appearing anatomy is restored after a few months.

The complications of this surgery include the following:

- **Wound Separation:** it is rare, but areas along the labioplasty incision can undergo small separation, which may require a period of delayed wound healing or extra wound care. A surgical revision may be needed in few instances.
- **Dog Ears:** Sometimes excess cones of tissue can develop, which is not visible during the surgery but can be as the tissue and the scars settle down. These can be removed if necessary.
- **Visible Scars:** The scarring from labioplasty is fairly minimal. Initially the scars will be visible and they may have a fluted “pie-crust” appearance from the suturing. Over time, these do settle quite a bit and become almost undetectable. Rarely do they need any kind of surgical touch-up.
- **Bleeding:** Bleeding can occur in rare cases and even rarer is it necessary for any kind of surgical intervention.
- **Infection:** Infection in this area is highly unlikely, given the fact that the blood supply is very rich. Nonetheless, all precautions are undertaken to prevent this complication with administering antibiotics after the surgery and good, clean sterile technique during the surgery. If an infection should occur, additional wound care may be necessary and even in the rare case, a surgical revision may need to be undertaken.
- **Chronic Discomfort:** This is an unusual issue, rarely encountered. If this occurs, it might need a minor surgical revision.
- **Sutures:** Most surgical sutures do dissolve after some time. On the rare occasion, Dr. Pautler may need to remove a suture or a knot that is irritating and not dissolving properly.

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- Firmness: Excessive firmness can occur after any surgery due to scar tissue. The occurrence of this is highly unpredictable. Additional treatment, including surgery, may be necessary if this unusual complication should occur.
- Asymmetry: Factors such as skin tone and fatty deposits may occur and may render the results of a labioplasty asymmetry. Most patients are asymmetric to begin with and sometimes complete symmetry is impossible to achieve. Additional surgery may be necessary in some certain cases where there is asymmetry.

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