

Labiaplasty

Your surgeon:

Prof Ajay L Mahajan

MB BS, FRCSI, MMedSc, MD, FRCS (Plast)

Professor of Plastic Surgery | Consultant Plastic Surgeon | Director of Research PSBRU

Your Predicament: "I don't like the look of the loose excess skin I have that also gives me discomfort. It can be a problem wearing swim suits too!"

Our Solution: We can help by trimming away the excess skin to give a tidy appearance to the area and avoid the excess skin getting caught in your underwear or during sex.

The anatomy of the labia varies widely from one person to another. There isn't a so called normal appearance of the female genitalia. However, in some patients the labia minora (inner lips) can be excessively large and protruding beyond the labia majora (outer lips). This affects the aesthetics of the genitalia and ladies hate the loose bits of skin that tends to stick out. This excess skin can sometimes get caught in the underwear or while having sex and can be quite uncomfortable. Also, the excess skin can sometimes show as an unsightly bulge through a swim suit and can be quite embarrassing. In some patients, this problem can appear to be worse when they have asymmetry with one side being considerably larger than the other side.

A labiaplasty procedure helps address the problem by trimming away the excess labia minora tissue so that it is concealed within the labia majora and does not tend to stick out. This improves the aesthetics of the genitalia and gives back the patient their confidence. Some patient have an undue excess of skin in the clitoral hood which prevents the clitoris to be adequately exposed and stimulated during sex. A clitoral hood reduction during a labiaplasty can help address this. Some patients desire to have fuller labia majora and this can also be achieved at the same time by transferring fat to the area. A simultaneous mons lift is also a consideration if the patient feels that there has been a droop in this area over the years.

Professor Mahajan plans the procedure to place the scar as inconspicuously as possible. It is often a challenge to get perfect symmetry of the two sides as the labial tissue is very lax. Professor Mahajan aims to achieve as close symmetry as possible by imprinting his marking on one side on to the other side to try to get a mirror image of the labia.

Patients often come to us for this procedure after contemplating about it for years. After the procedure, they wish that they had had it done ages ago and did not have to live with the lack of confidence all these years!

Pre Operation

Professor Mahajan will acquire a detailed history from you about your concerns and your medical history. He will take the time to understand your desires and discuss in details as to how he can achieve the results you want. A detailed examination involving assessment of the genitalia and neighbouring tissues will be done.

Depending on your examination a treatment plan will be formulated tailored to your needs. Depending on the characteristics of your labia, Professor Mahajan will discuss surgical options with you. You will together be able to decide the technique of the procedure that will be used to achieve your desired results. Limitations of the procedure will also be discussed with you.

Professor Mahajan will discuss the options of having a clitoral hood reduction, fat transfer to the labia majora or a mons lift during your consultation. If these are areas of concern for you, the surgery involved in addressing this will be discussed with you. You can then make an informed choice of the options that best suit you.

Pattern of the incisions, procedure and subsequent scars will be discussed in detail and you will be given an opportunity to probe into any aspect of the proposed procedure. Once you decide to go ahead following the consultation, you will be required to attend the pre-assessment clinic to ensure you suitability for the procedure. You will need to stop smoking (including electronic cigarettes and nicotine patches) and stop any anticoagulant medication such as Aspirin, Warfarin, etc as suggested by Professor Mahajan.

Operation

You will be admitted to the hospital on the day of the procedure. The operation will be done under local anaesthesia or general anaesthesia as previously decided. It will be carried out according to the technique that was planned at the consultation. This will depend on the characteristics of your labia and will involve using the approach discussed before.

Professor Mahajan will carefully mark the area of the labia minora that needs to be excised. He will then transfer the marking to the other side by approximating the two labia to produce a mirror image of the marking on the other labia to try to achieve as close symmetry as possible. A portion of the labia minora is left behind to give a natural appearance to the labia. If clitoral hood reduction has been planned, they this will be done with utmost care according to prior discussions with the patient. The excess tissue is then excised and the wound is closed with absorbable sutures that will be visible on the outside. This will be followed by fat transfer to the labia majora if this has been planned according to prior discussions with the patient.

The procedure can take 1 to 2 hours to do depending on the complexity of the case. Professor Mahajan will dedicate as much time as is necessary to create your new aesthetically pleasing form and achieve the results you desire.

Post Operation

Following your procedure, you will be taken to your room, once you have recovered from the anaesthetic. You will be cared for to the highest standards by our well-trained nurses. Once you have recovered enough after the surgery, you will be encouraged to sit out of the bed and mobilise to reduce the risks of blood clots in your legs or lungs. You will have some pain and discomfort for 2 to 5 days, but we will ensure that you are comfortable with adequate analgesia.

You can go home as soon as you are comfortable enough to go home on the same day of your surgery. You will have dissolvable sutures and as a result you will not need to endure the discomfort of having them being removed. Scars are unavoidable following any surgery, but Professor Mahajan aims to make these as neat as possible. There will be swelling in your labia immediately following the surgery. Over the next few weeks the swelling will gradually go down and the contour of the labia will improve.

You will be seen 2 to 8 weeks following the procedure as discussed with Professor Mahajan following your surgery. Professor Mahajan will be available to see you at any time following the procedure should there be any unexpected problem.

Subsequent Procedures

The abdomen and genitalia is considered as one aesthetic unit and it is not uncommon for patients to ask Professor Mahajan to perform an Abdominoplasty / Mon's lift procedure at the same time or subsequently. Options can be discussed with Professor Mahajan at the consultations.

LABIAPLASTY NEED-TO-KNOW INFO

• Duration of surgery: 1 to 2 hours

•Anaesthesia: Local Anaesthetic or General Anaesthetic

•Duration of inpatient stay: Day case surgery

•Wounds healed in: 10 to 14 days

•Scars matured in: Settle in 3 to 6 months, fully matured in 12 to 18 months

•Back to light work (Desk job): 2 weeks

•Back to cardiac exercise / fast walking: 2 to 3 weeks

•Back to labour intensive work / Exercise: 6 to 8 weeks

•Sexual activity: 8 weeks

•Able to drive: 2 weeks (Should be able to apply emergency stop)

- 'Long haul' flights / holidays: Avoid four weeks before and after a general anaesthetic. Short flights are okay but take precautions to prevent DVT.
- •Shower / bath: Shower as normal, but gently wash the area. Avoid baths for 2 weeks.
- •Sun bathe: If you end up on a nude beach, keep the scars covered until they mature in about a year or so!
- •Garments: Avoid tight underwear.
- •Post operative review: 2 to 8 weeks as discussed following surgery (As often as necessary if clinically indicated)
- •Post Operative pain / discomfort: 2 to 5 days
- •Potential risks: (Every effort is made to reduce the risk of complications, but potential risks are) Bleeding, bruising, swelling, haematoma, infection, delayed wound healing, scars hypertrophic, stretched, sensitive, under or over correction, asymmetry, numbness, reduced sensitivity of clitoris in clitoral hood reduction, discomfort on intercourse, altered libido, risks associated with general anaesthetic, blood clots in legs or lungs, risk of Covid infection / death.

Please refer to https://www.amaestheticsurgery.uk/labiaplasty for detailed information about the procedure.