

Labiaplasty - Reduction of Labia Minora and Augmentation of Labia Majora

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SUMMARY

In contrast to the controversial forms of labiaplasty being performed for religious reasons, many women in the West seek labiaplasty for functional and aesthetics concerns. Hypertrophic labia minora can present functional problems during sex, chronic local irritation and discomfort in everyday life, and asymmetry of the labia minora may also represent an aesthetic problem. The other vulvar region which often requires surgical intervention is the labia majora. Deformities, asymmetries and loss of volume in the labia majora are the most common reasons for corrections required by patients.

In this paper we provide a brief overview of the etiologies, goals, operative techniques, results and potential complications of labiaplasty, together with a presentation of our results from long-term experiences in these procedures.

Reduction of the labia minora is the most frequently performed female external genital cosmetic procedure performed today [1]. Incision/excision of the labia minora can be efficiently and safely performed using an Er:YAG laser (Fig. 1) Most studies on aesthetic labiaplasty suggest that the procedure is associated with a high level of patient satisfaction.



Fig. 1. Example of a labiaplasty procedure; before (left) and after (right).

One of the most common surgical interventions on the labia majora is augmentation with autologous fat transfer (Fig. 2).

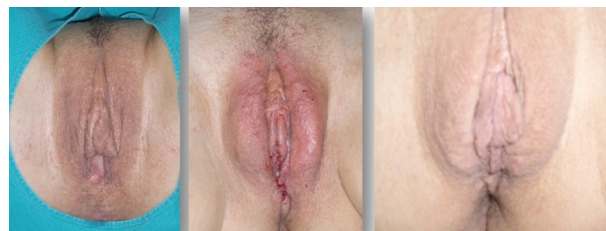


Fig. 2. Example of augmentation of labia majora with autologous fat transfer. From left to right: before, immediately after and 1 year after the procedure.

REFERENCE:

1. Goodman MP, Placik OJ, Benson RH, Miklos JR, Moore RD, et al. (2010) A large multicenter outcome study of female genital plastic surgery. *The journal of sexual medicine* 7: 1565–1577.

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