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What is Vaginal Rejuvenation?

One of the fastest growing segments of cosmetic surgery is female genital surgery. Many phrases are used to describe what is surgically done and the catch-all phrase lay people have seen with increasing regularity is “vaginal rejuvenation.” The branded name “Laser Vaginal Rejuvenation” has even gained national attention in print and television. In reality, vaginal rejuvenation is a marketing term referring to **vaginoplasty**, or the surgical tightening of the vaginal canal. Birth trauma, tissue stretching, and improper surgical healing are the usual reasons for requesting vaginoplasty. Vaginoplasty usually entails a modification of a standard gynecologic procedure called “posterior repair” along with rebuilding of the perineum (the space between the vagina and rectum). This procedure was traditionally performed for a fallen or prolapsed rectum, or rectocele. A rectocele is a bulge of rectum going into the vagina. A similar appearing vaginal bulge is an enterocele. It is a bulge of small bowel going into the vagina. Gynecologists and urogynecologists have the most training performing these types of surgery. Lasers, scissors, cautery units, knives are used in surgery. Excellent results have been achieved by all these methods.

Another surgery rapidly gaining social acceptance and widespread growth is **labiaplasty**. This is when the labia minora (the “minor lips”) are sculpted to look more pleasing and less prominent. The usual reasons for having this surgery done are complaints of large and unappealing labia minora. Many complain of pain and irritation from pulling and rubbing caused by wearing tight clothing, horseback riding, and sexual intercourse. Teens and young women complain of the inability of wearing swimsuits for fear of their labias protruding out and causing severe embarrassment. At times, the labia majora can also be altered by excision of excess tissue, resurfaced and shrunk with CO2 lasers, or injected with fat to make it look more plump and appealing. Others want liposuction done in this area and also above it in the Mons Pubis to make the region less

prominent. Labiaplasty and vaginoplasty have been referred to as a “vaginal face-lift.” Gynecologists have performed these procedures for years. Plastic surgeons have recently showed interest in this rapidly growing ultra-sub-specialty surgery.

Modern pelvic and vaginal surgery often requires the use of strong new materials to replace loose and damaged tissues. Urogynecologist are usually the specialists with the most advanced training in these types of advanced repairs. Vaginoplasty typically takes about 60 minutes to complete depending whether or not a rectocele or enterocele has to be repaired and if mesh or tissues are used to repair the vaginal hernias. Labiaplasty takes about 60 minutes to perform. A combination of both surgeries will take two hours to finish. A full pelvic reconstruction involving mesh or tissues will take three hours.

In recent years reconstructive pelvic surgeons and urogynecologist, with specific training in pelvic and vaginal surgery, have popularized these aesthetic genital procedures and have helped provide it legitimacy. It was only several years ago when cosmetic vaginal surgery was attacked vigorously by many medical practitioners as barbaric, unnecessary, and frivolous. However, baby boomers drove the acceptance of these procedures and fueled the growth of this subspecialty. Women did not want to live with unflattering, sagging, and large labias, nor did they want to live with gaping open vaginas and lack of sensation when having sexual relations. Both young women wanting a sleeker appearance of their genitals and older women wanting to repair the ravages of childbirth and time are in the forefront of demand to look and feel young again. Southern California became the birthplace of this movement.

There is great controversy whether or not vaginal rejuvenation can improve the pleasure of intercourse or increase sexual desire. There are no randomized controlled studies showing that narrowing the vaginal canal improves orgasms or dramatically alters a woman's sex life. Reports of improved sexual sensation from increased friction are by anecdotal experience and less scientific surveys. However, many couples do report more satisfying lovemaking, more tightness, and a belief that surgery has helped their sex lives.

There are only a handful of surgeons who perform these surgeries in adequate volumes to be proficient and adept. Technical skill is of paramount importance but having an artist's eye is of equal value. The cost of a vaginoplasty is approximately \$6,000 with labiaplasty commanding a \$5,000 price tag. Combining the surgeries will average \$10,000. Insurance companies do not typically cover labiaplasty and vaginoplasty. However, repair of cystocele, rectocele, enterocele, fallen uterus, and slings for incontinence are usually covered by medical insurance. Cosmetic labiaplasty and vaginoplasty can be combined with pelvic prolapse repair at the same time. Some women even have their tummy tucks and breast augmentations done concomitantly as part of their “extreme makeover.”