





INTERNATIONAL CONFERENCE PRESENTATION PARIS 2016

AMEC 2016
12th Aesthetic & Anti-aging Medicine European Congress

21-22 OCTOBER 2016
PARIS, FRANCE • PALAIS DES CONGRÈS

THE LARGEST AND MOST INTERACTIVE AESTHETIC LIVE SHOW IN EUROPE
FACES OF THE WORLD • WORLD OF FACES



  
WWW.EUROMEDICOM.COM



REFINEMENTS IN LABIOPLASTY

Michael Lau, MD, FACS, FACOG

Pelvic Plastic & Cosmetic Surgeon

Radiant Rejuvenation & Cosmetic Surgery

Seattle, Washington, USA

Clinical Faculty

University of Washington School of Medicine

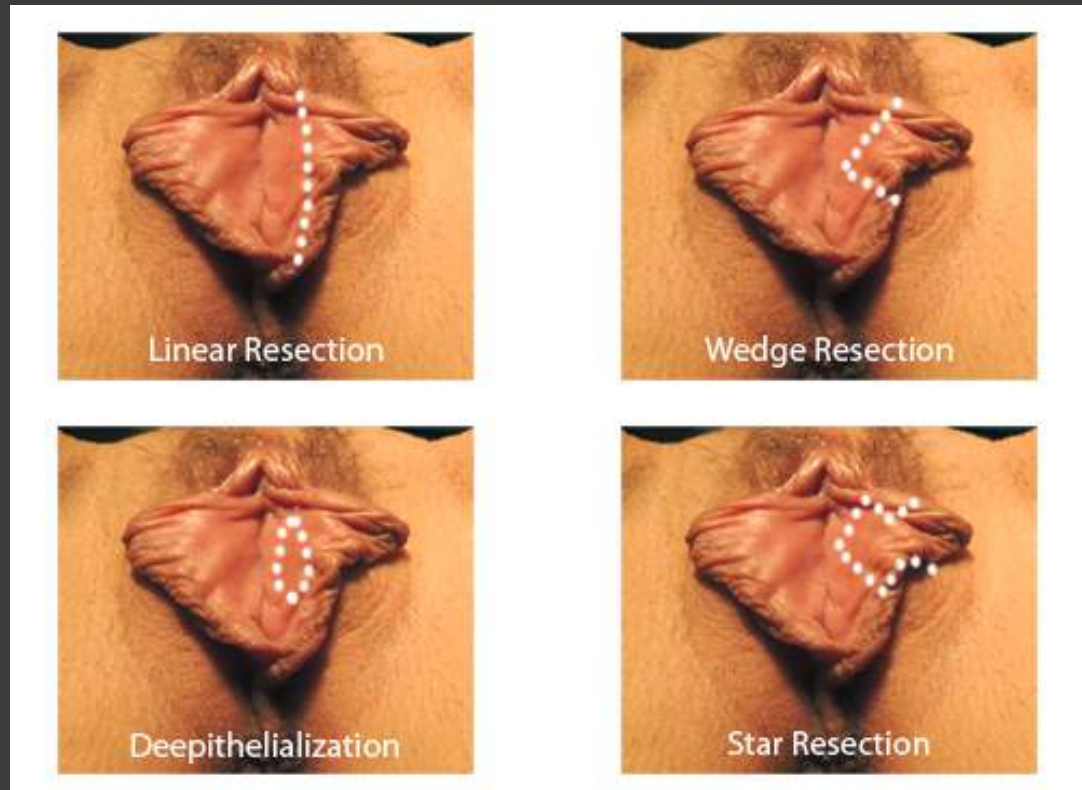
Seattle, Washington, USA

www.drmaella.com

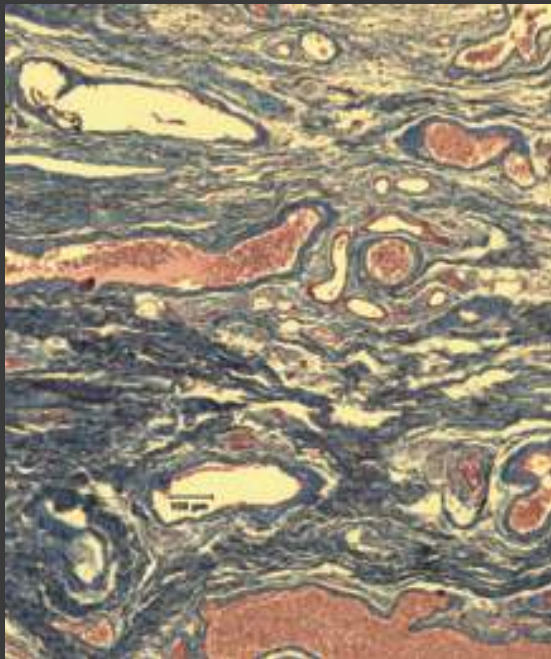


Common techniques for Labioplasty - Minora

Linear resection is commonly used. A concern and question: Does linear resection affect the sensation of the labia?



Labia minora are important to sexual function – specialized vascular elements engorged with excitation; abundant, dense nerve endings at inner border (IB) of labia. Factors to be considering in performing labioplasty.



Labia minora with dilated vascular space surrounded by blue-stained fibro-elastic tissue, not closely packed (Yang 2005).



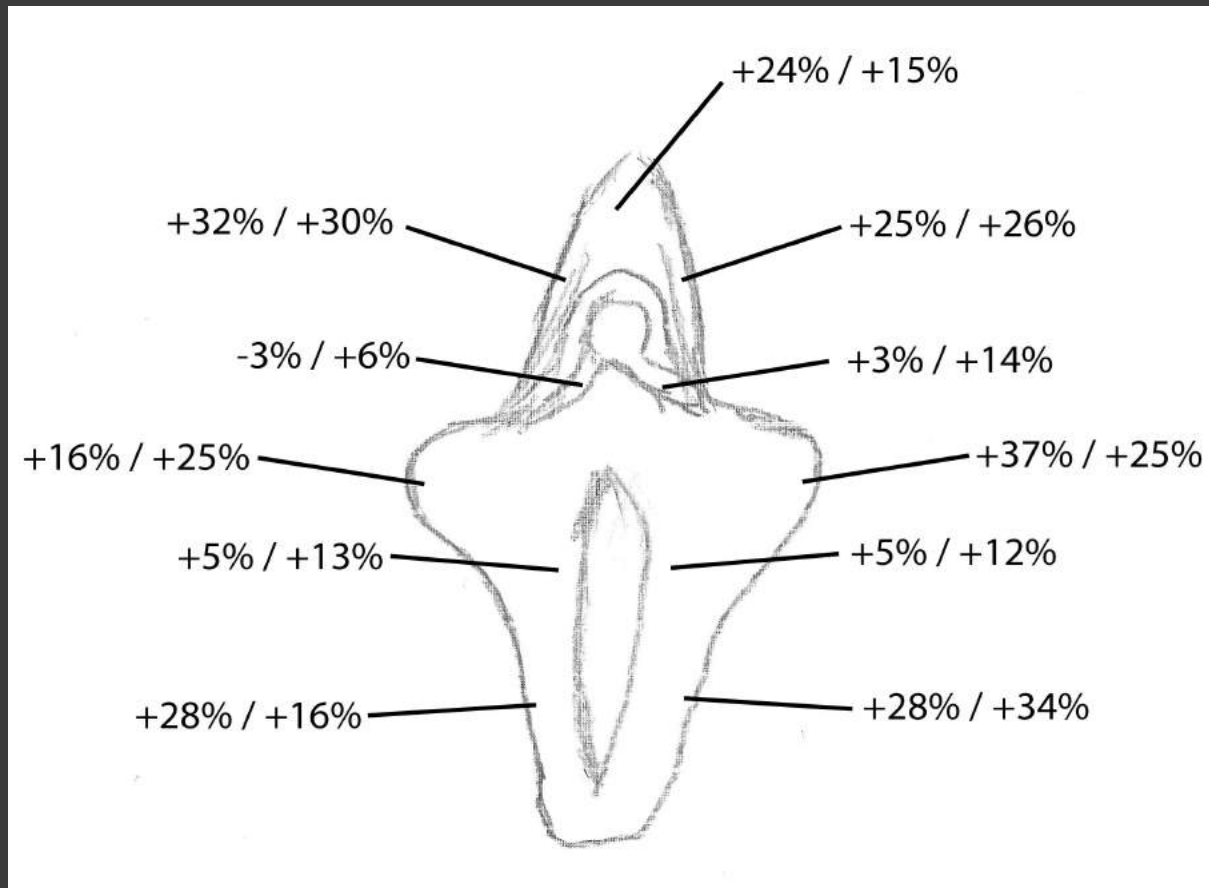
Internal border (IB) of labia minora is densely innervated as compare to external border (Schober 2010).



Study assessing sensation change at labia minora after labioplasty using linear resection technique.

20 patients had sensations tested – touch/pressure – before and 6 weeks after labioplasty. The % change (+ increase or – decrease of touch/pressure sensations after labioplasty) at 11 sites over the clitoral hood and labia minora as illustrated below.

Conclusion: There was no decrease in sensation after labioplasty.



Refinements in techniques for Labioplasty that would help in preserving sensation of the labia.

- First principle – labia minora are important for sexual function, labioplasty should improve both aesthetics and function
- Labia minora have specialized vascular tissue important to sexual function that needs to be preserved
- The inner border of the labia minora has more dense innervation than the outer border, so minimize resection of the inner border
- Avoid energy devices that can damage sensory nerves - e.g. no electric cautery for cutting or excessive coagulation



Refinements in techniques for Labioplasty that would help in preserving sensation of the labia.

- Sharp and precise dissection and approximation of labia tissue, avoid tissue trauma and over tensioning that might affect the specialized vascular elements of the labia minora and nerve endings
- Use fine and rapid dissolving sutures
- Labioplasty can be done using just local anesthesia, resulting in less anesthetic risks, shorter recovery, and more cost effectiveness

