

Vaginal tightening (Vaginoplasty)

Vaginoplasty is a procedure designed to reconstruct the vaginal muscle and lining, resulting in a tighter vagina.

Vaginoplasty, also known as 'vaginal rejuvenation' or vaginal tightening, is a procedure that can correct the problem of stretched vaginal muscles resulting from childbirth. By tightening and narrowing the vaginal canal, it can restore the intensity of sexual sensation and increase sexual satisfaction.

For women who've experienced multiple childbirths, the vagina may become stretched and can lose its tone and strength. The result can often be loose, weak, vaginal muscles. If the pelvic muscles become too loose, exercise may not assist this problem. An oversized and overstretched vagina reduces sexual sensation for both partners and Vaginoplasty can bring about an improvement.

The consultation

During the first consultation the surgeon discusses any urological and sexual problems. The vagina and the pelvic floor muscles are examined: we need to determine that you are a suitable candidate for the procedure.

The Surgery

Vaginal tightening is performed either under general anaesthetic or local anaesthetic with sedation, and may require an overnight stay. The operation takes around an hour to perform.

In this procedure, which is normally performed under local anesthesia with sedation a day case, a section of vaginal lining is removed and the underlying muscles are repositioned and tightened in such a way that the vagina is noticeably tighter. The surgeon will remove a section of tissue from the wall of the vagina, the elastic tissue that is stretched and sometimes cut or torn during childbirth. Perineal muscles are then reconstructed and repaired. Finally Mucosa (lining of the vagina) are then rejoined with stitches.

The incision is inside the vagina and there are therefore no visible scars from this procedure. The result is an immediate decrease in the diameter of the vagina, and an increase in the tightness of vaginal muscles. This will also restore the vagina

and supporting structures to a "pre-pregnancy" state.

Any post-operative discomfort is generally less than that of an episiotomy. This area usually heals well and the wound should settle within about 10 days. The repair is done with dissolving stitches which take approximately 4 weeks to dissolve.

After Surgery

A sanitary dressing and a perineal pad may be applied immediately after surgery, and all wounds are sutured with dissolvable stitches. In the first week after surgery the area is likely to be swollen, and bruised, and urinating may be very uncomfortable. This burning and stinging sensation can be eased, either by urinating whilst showering, or pouring lukewarm water from a jug over the area whilst urinating. An ice pack (or bag of frozen peas) can be used to alleviate the discomfort and reduce the swelling.

You will be sore and possibly a little swollen after surgery. Patients are usually able to walk comfortably within a few days and may return to sexual activities within 4-6 weeks. The final result will be seen in around 2-3 weeks following your surgery.

What are the risks?

Fortunately complications with these procedures are very rare. They include: bleeding which usually stops spontaneously within 24 hours, infection which can normally be treated with antibiotics and finally, opening of parts of the wound, which if it happens, will normally heal spontaneously. Fortunately these complications are very rare.

Getting you back to work and normal activities

We recommend that patients observe as much bed rest as possible during the first week after surgery. Personal hygiene is extremely important for rapid healing and twice-daily showering is essential. Loose underwear should be worn for the first two weeks. Tampons should not be used during the first six weeks.

You would expect to be back to work in about a week and back to normal activities, including penetrative intercourse in 6 weeks.