

# Reasons behind an increase in female genital cosmetic surgery in Australia and the UK

April 14 2015

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Publicly funded labiaplasties in Australia and the United Kingdom have more than doubled over the last decade, leading experts will say tomorrow at the RCOG/RANZCOG World Congress in Brisbane, Australia.

In the UK, the number of labial reduction procedures has risen five-fold in the NHS over the past 10 years, with over 2,000 operations performed in 2010. In Australia, statistics published in the *Medical Journal of Australia* in 2011 estimated that approximately 1,500 labiaplasty and vulvoplasty operations were performed in 2010.

In a session dedicated to discussing female genital cosmetic surgery (FGCS) at the RCOG/RANZCOG World Congress, Cathy Cui from the University of New South Wales, Australia and Calida Howarth and Tristan Harding, from the General Practice and Primary Health Care Academic Centre, University of Melbourne, Australia discuss the need for more research around [women](#)'s motivations for seeking FGCS, in particular labiaplasties.

In a study by the University of Melbourne, qualitative interviews were conducted with women aged 18-28 years. These focussed on women's perceptions of the "normal" and "ideal" vulval anatomy, on FGCS and on what sources of information were available. The results suggest that women would benefit from better access to resources showing the range of normal vulval anatomy. GPs receiving requests for referral to FGCS should discuss with patients their understanding of the procedure.

Commenting on the study, Calida Howarth says: "It is essential that doctors do not assume that women have an inherent knowledge of their genitalia and the anatomical terms used to describe it. This contemporary women's health issue requires further research and interdisciplinary collaboration if we are going to ensure best practice and achieve optimal outcomes for our patients."

In another study, led by the University of New South Wales, Australia, researchers examined attitudes to pubic hair removal among Australian university students and the relationship to physical discomfort, viewing of pornography, genital self-image and the consideration of labiaplasty amongst women. The study found no link between the removal of pubic hair and requests for labiaplasties. However, the study also highlighted the need for careful recognition amongst the healthcare profession of the possible reasons for the increase in women seeking FGCS.

Cathy Cui states: "Whilst women request labiaplasty for physical and psychological reasons, the reasons for increasing numbers of surgeries in the last decade are not clear."

Discussing the impact of FGCS in general practice, Tristan Harding notes that this is a new phenomenon, but there is also a lack of education regarding the management of patients requesting this procedure. There is also little knowledge regarding female genital structure, function and vocabulary within the GP community and women themselves do not have a good understanding of genital anatomy and the diversity of its appearance.

He adds: "GPs would be greatly assisted by practice guidelines when faced with such requests. If they were able to provide adequate, accurate information to patients, this might prevent unnecessary surgery and alleviate patient anxiety. GPs should also consider referring women to a gynaecologist rather than a cosmetic surgeon when they wish to have

surgery."

The experts all highlight the fact that healthcare professionals have a duty of care to provide women with accurate information on the diversity of the appearance of female genitalia and to suggest simple measures to relieve genital discomfort where no underlying health condition can be identified.

Additionally, there is a need for clinical guidance for healthcare professionals and further research around FGCS and patients' knowledge and perceptions of "normal" vulval anatomy.

Provided by Wiley

Citation: Reasons behind an increase in female genital cosmetic surgery in Australia and the UK (2015, April 14) retrieved 24 April 2024 from <https://medicalxpress.com/news/2015-04-female-genital-cosmetic-surgery-australia.html>

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