

## Protecting the ageing vagina

Petrina Adele smiles as she walks down her street. No one knows her secret. The thirty-six year old mother feared that “things downstairs were no longer the same” after her four children but now she’s having the time of her life in the bedroom with her new husband. All it took was \$15,000 and two hours under the knife and she has her old body back. The magic of vaginal rejuvenation surgery changed her life completely.

This dangerous nonsense is from a blog allegedly written by a grateful patient published on the website of a well-known Sydney cosmetic surgeon. The good doctor offers solutions to any part of that body that doesn’t shape up - smaller noses, bigger breasts, slimmer tummies, puffier lips, bigger penises, even a surgically- inserted six pack.

His latest speciality is hidden away on his labioplasty website where he boasts over 2000 female genital surgeries. There are lurid colour videos showing vaginal lips being trimmed into perfect matching pairs and grisly step-by-step viewing of “vaginal tightening” showing removed bits of “weak vaginal wall” lying pitifully on a plate, looking like giblets left from the preparation of a chicken dinner.

“It’s alarming that women whose bodies are quite normal and healthy can be enticed into this type of serious, potentially risky surgery,” says Thierry Vancaillie, professor of gynaecology at the University of NSW and a world expert on pelvic pain. Vancaillie says there’s now clear evidence that women who experience unnecessary “vaginal rejuvenation” surgery can suffer life-long problems due to post-surgical neuralgia - pain from the surgical scars.

For some years now there’s been public concern about the exploitation of women through unnecessary genital surgery. Currently the Jean Hailes research unit at Monash University has combined with women’s health organizations to investigate the reasons behind, and attitudes toward, female genital cosmetic surgery. The researchers are talking to both women and doctors, hoping to find out what’s behind this worrying trend.

Last year stringent new regulations were instituted regarding Medicare funding for labioplasty – an operation sometimes jokingly called “The Barbie” which surgically trims the lips surrounding the opening of the vagina. There’s long been speculation as to why this has suddenly become so popular. Are Brazilians to blame for removing pubes that kept these parts hidden? Perhaps internet porn has led to a growing taste to have everything cosmetically perfect?

Whatever the reason, many doctors seem delighted to respond to the demand - the number of women having their labioplasties subsidized by Medicare leapt from only 240 in 1993 to 1,584 in 2013/14. New regulations introduced last November have gone some way to stemming the flow. Medicare-funded labioplasties dropped by almost a third in the last year.

But while most of the public attention has been on cosmetic surgery beautifying what women see between their legs, rejuvenating ageing vaginas remains a booming business.

“There can be sound medical reasons for vaginal surgery – for example, to correct obstetric trauma. But a lot of these so called ‘vaginal rejuvenation’ procedures are totally unnecessary and given the risks of scarring and pain I strongly recommend women exhaust all non-surgical approaches like pelvic floor physiotherapy before agreeing to surgery,” says Professor Vancaillie.

It doesn’t help when the media runs articles joking about women dreading their “last shaggable day” – witness a recent Sam de Brito column on “tightening up the lady’s nether regions.”

It’s not surprising older women worry their nether regions are becoming unsightly or no longer working as they should, given the normal changes that come with age. For a start most women lose pubic hair so that everything seems more exposed and visible. After menopause the external genitals change in appearance – fatty deposits under the skin mean the vulva shrinks, the outer lips can become less plump and more pendulous and the clitoris may appear larger due the shrinkage of the surrounding fold of the skin. Colour can change too, so that the whole area looks a little darker and less pink. But all this is normal – just the way things are in a mature, healthy older woman’s body.

Then there’s the vagina, which due to a drop in oestrogen after menopause can become narrower and shorter. The walls can become thinner and less elastic (this is called ‘vaginal atrophy’) plus there’s often a drop in vaginal lubrication and changes in the pH level which means women are more prone to vaginal infections. All this can cause real issues for women – discomfort during sex, and sometimes tearing of the thinner vaginal walls, more cystitis, more difficulty getting proper pap smears.

Many of these changes can be minimized by topping up oestrogen in the post-menopausal woman. Hormone Replacement Therapy (HRT) was doing a great job in helping protect ageing women and their vaginas until the publication of the Women’s Health Initiative study in 2002 in the USA. Practically overnight media stories about this study led to millions of women ceasing using HRT. But the truth is that the vast majority of women can take HRT without any adverse outcome.

“Most women can use HRT with very little risk, and it is important that their individual needs are assessed properly. The results of the WHI trial which frightened many women off HRT may not apply to them. Plus for vaginal atrophy, oestrogen creams and pessaries can be applied directly to the vagina – an option suitable for the vast majority of women,” explains Professor Ted Weaver, a past president of the Royal Australian and New Zealand College of Obstetrics and Gynaecology.

It's worth checking out the menopausal drug Livial, which combines oestrogen –like with a testosterone-like action and can be amazingly effective in recreating a healthy, lubricated vagina - as I know from my own experience and feedback from many other older women, who often also report increased libido.

HRT is not advised for women who have had certain types of cancer but even here, the tiny doses of oestrogen in creams and pessaries may be okay, after consultation with doctors who have the appropriate expertise.

That's only the beginning. Here, in brief, are some other things older women should know about caring for the ageing vagina:

- Apart from hormonal creams there are local treatments available to help maintain a healthy pH. Most women are also advised to use lubricants to protect the fragile vagina.
- Avoid glycerine-based lubricants like KY jelly which cause thrush and dry the tissues. Olive, almond, or organic coconut oil can be good alternatives as are commercial products such as Sylk, Astroglide Sensitive or Astroglide Natural.
- Vaginal atrophy can result from long-time use of the contraceptive Pill, or even shorter use of low dose pills in some younger women.
- Older women returning to sexual activity after a long break or women who have experienced painful sex may need the help of a specialist physiotherapist to help train pelvic floor muscles to relax in order to avoid painful muscle spasm with intercourse and subsequent chronic pain problems.
- You rarely need surgery for painful sex nor a “loose” or “shortened” vagina. These problems are far better addressed with pelvic floor exercises, oestrogen therapy and the new laser treatments – see box.
- Due to age and lifestyle related blood flow changes, many older women have more difficulty climaxing and orgasms may be less intense. It helps to have regular blood flow in the vulva and preferably regular orgasms to keep genital tissues healthy.
- Older women often need lip-liner to stop bleeding of their lipstick, so too the anal opening can become puckered requiring extra care with cleanliness to avoid inflammation and infection.

## **Laser Breakthrough**

Midst the worrying stories of women suffering unnecessary surgery there is some good news – a real breakthrough in the treatment of vaginal atrophy. There's a new fractionated

CO2 laser treatment which optically splits the laser beam into a series of tiny dots that are aimed at the inside walls of the vagina. The dots remove tiny pinholes of tissue and then, as the body repairs itself, it stimulates cells to create healthy new tissue. Research shows the laser also promotes activity of specialized cells that create elastin and collagen – the building blocks of healthy tissues.

For the past year Professor Vancaillie has been using the CO2 laser in patients with vaginal atrophy following breast cancer treatment and finds it significantly reduces painful intercourse. “We’re finding the treatment is highly effectively with 80 per cent of our patients responding positively. It’s quite remarkable,” he says, adding it is also helpful with some conditions causing pain in younger women. (ends)