

Northwestern Memorial Hospital

Patient Education

CARE AND TREATMENT

Vaginoplasty Gender-Affirming Surgery

Gender-affirming vaginoplasty is a surgery to construct a vagina. This may help you achieve your preferred gender identity.

This brochure describes what you need to do before and after surgery to have the best possible outcome.

If you have any questions, ask your physician.

Surgical approval

We follow guidelines from the World Professional Association for Transgender Health (WPATH) for gender-affirming surgery. This includes requiring 2 separate letters of readiness from 2 different mental health professional before we can move forward with your surgery. We can give you resources to help you get these letters.

Getting ready for surgery

You should be as healthy as possible before surgery. This will make it easier for your body to recover. You will meet with our surgical team, who will take care of you before and after your procedure. They will assess your health. They will tell you how you can improve your health to make your surgery safer and help you recover faster.

Permanent hair removal

The surgeon will use the skin from your penis and scrotum to make your vagina. You will need to remove hair from this area permanently before surgery. Once the skin is on the inside of your vagina, there is no good way to remove hair growth. Hair growth in the vagina may cause problems with hygiene and comfort. Also, you may not be happy with the way it looks.

Electrolysis and laser hair removal are options for permanently removing hair.

- Electrolysis provides the best results for removing hair permanently. This method gets rid of hair with an electric current.
- Laser hair removal is also an option, but it may not work as well if you have lightercolored hair or darker skin.

We will give you a list of aestheticians (hair removal specialists) who provide these services.

Hair removal typically takes 9 to 18 months, but the timeline is different for everyone. In general, it takes several cycles of hair removal and regrowth to remove the right amount of hair. Only you can decide when you are ready to go ahead with surgery based on your level of hair removal. Your aesthetician and surgeon will help you with this decision.

Smoking and nicotine use

Smoking greatly increases the risk that your surgery will fail. It can keep your wound from healing or cause it to become infected. Your surgery is 10 times more likely to fail if you smoke. You cannot smoke or use nicotine or tobacco products for 2 months before surgery and at least 3 months after surgery. You may need to wait longer than 3 months after surgery. This depends on how you are healing.

You cannot smoke or use any nicotine or tobacco products, including:

- E-cigarettes
- Nicotine gum
- Nicotine patches

We test all patients for nicotine before surgery. If you are positive for nicotine, we will cancel your surgery. You cannot have surgery until you have a negative nicotine test.

Marijuana use

You do not need to stop using marijuana before surgery. But, you cannot use any marijuana or marijuana products in the hospital.

You may have an easier time managing pain after surgery if you cut down on your marijuana use before surgery.

Weight

Being overweight increases problems from anesthesia and surgery, such as breathing problems, wound infections, and blood clots to the legs and lungs. The surgical risks for vaginoplasty also increase with a high body mass index (BMI). You will have the best function and appearance if you are as close as possible to your healthiest body weight before surgery.

We do not have a weight requirement. However, if your BMI is above 40, the risk of major problems after surgery is very high. We believe that patients with a BMI less than 35 will have the best results. You can learn more about BMI and calculate your BMI by visiting **cdc.gov** and searching "BMI."

Diabetes

People with diabetes may have a higher risk of getting infections or healing slowly. Controlling your diabetes will help reduce this risk. Work with your primary care physician to manage your diabetes as best as you can before surgery.

A hemoglobin A1C blood level test measures your average blood glucose (blood sugar) level over the past 3 months. At the time of surgery, your hemoglobin A1C blood level should be 7 or less.

Medications

Your surgeon and medical team will talk to you about your medication plan before surgery.

- You will stop taking estrogen for 2 weeks before surgery. This will reduce the risk of blood clots. You can start taking it again about 2 weeks after surgery.
- The night before surgery, you will take a "bowel prep" (medication to clean out your bowels)

Surgery

Surgeons do most vaginoplasty surgeries with 1 planned surgery. Some patients who have a vaginoplasty may need a 2nd, much smaller surgery. This allows "touch-ups" to areas that did not heal as expected. To allow time for blood supply to heal and restore the tissue, the 2nd surgery would be 3 to 12 months after the 1st surgery.

There are different ways to line the new vaginal canal. The surgeon may use skin from the penis and scrotum. If the surgeon needs more skin for the procedure, they may take skin grafts from the groin and abdomen (belly). Sometimes, the surgeon will use the inner lining of the abdomen (peritoneum) instead of these grafts.

Your surgeon will talk with you about these options. They will tell you the pros and cons of each so you can make an informed decision.

After surgery: In the hospital

What to expect

Expect to stay in the hospital for about 1 week after surgery. For the first 5 days, you will not be able to get out of bed.

You will have a large bandage covering the surgical area. This will stay in place for 5 days. You will have a catheter (thin tube) in your bladder to drain your urine. You will have vaginal packing to help the skin graft heal. It is important to stay in bed so the skin graft can heal well. You may want to bring books or other entertaining things to pass the time.

Your care team will remove the catheter and vaginal packing 5 days after surgery. We will make sure you can empty your bladder.

About 1 in 5 people temporarily cannot urinate on their own after the catheter comes out. If you cannot urinate, we will put a catheter back in for another week. You will be able to leave the hospital with this catheter. We will remove it at your 1-week follow-up office visit.

Problems after surgery

Every surgery has a risk of problems. You may do everything right, and we may do everything right, but still things may not go as planned. Be mentally prepared for the possibility of a problem.

Serious problems are rare, but may include:

- Rectal injury that may need colon surgery
- Bladder injury
- Nerve injury
- Blood clots that could go to your heart or lungs

Wound problems may include:

- Poor healing that may need bandage changes
- Bleeding
- Infection

We will talk to you about all of the possible problems and risks at your consultation.

Care at home after surgery

Keep the wound area clean by showering and using a mild soap. Do not have sexual intercourse for at least 3 months after surgery. Your timeline will depend on how you are healing.

Dilating the vagina

It is very important to dilate your vagina to keep it open. If you do not dilate your vagina, the vaginal canal will close.

Most patients start vaginal dilation 1 week after we remove the vaginal packing. Patients will usually dilate their vagina 2 times a day for 15 minutes each time. Make sure you have a space in your home where you have privacy to do this. We will show you how to do vaginal dilation.

Plan to return to the Northwestern Memorial Hospital clinic once a week for 4 to 6 weeks after your surgery. We will check your wounds and help you with vaginal dilation. Then, visits will continue as needed, until about 3 months after surgery.

If you are having a hard time with vaginal dilation, we will help you. If needed, we may help you arrange to work with a pelvic floor physical therapist.

What to expect while recovering

Take it easy while your body recovers. Follow these guidelines:

- Rest. Do not overdo it with activities that will tire you.
- Do not work out or do heavy exercise.
- Do not lift anything that is heavier than 10 pounds. Follow this recommendation for the first 2 months after your surgery.

You will have a lot of bruising and swelling after surgery. Swelling may take months to go away.

The clitoris may be sensitive while the nerves heal. We will prescribe medication to help ease your discomfort.

Some slight difference in size and symmetry of the labia is normal. Talk with your surgeon if this bothers you. Your surgeon may be able to do a "touch-up" surgery several months after the 1st surgery to correct this.

If you have questions

If you have any questions or need help, contact the Northwestern Memorial Hospital Gender Pathways Program at 312.695.2422 (TTY: 711) or send your care team a note through MyNM. For general questions, you can also email genderpathways@nm.org.