PATIENT INFORMATION Defibulation/surgical opening of the labia BEFORE AND AFTER





What is female genital mutilation/circumcision?

During female genital mutilation, all or parts of the girl's external genital organs are removed and/or changed for no medical reason. This can lead to a variety of problems later in life. The problems vary depending on how the genital mutilation was performed. In the case of a pharaonic circumcision (infibulation), the labia have been joined together in front of the vaginal opening.

The narrowed opening in the skin bridge can cause several typical problems:

- It may be difficult or take a long time to urinate
- There may be menstrual difficulties
- It may be painful, difficult or impossible to have sexual intercourse
- It can be difficult or impossible to perform a gynecological examination, for instance to get a cervical pap smear test
- Vaginal childbirth or vaginal examination during delivery may be difficult

The operation:

If the opening in the joined labia is narrow and causes problems mentioned above, we can help by performing an opening surgery, also called defibulation.

The surgeon (doctor) will then open the skin bridge in front of the vaginal opening and sew the edges on each side. The stitches promote healing, decrease pain and prevent the labia to fuse together again during the healing process. The stitches remain for approximately 2-3 weeks and then dissolve on their own.

You will receive an injection with local anaesthetics into the skin bridge before the operation so that you don't feel pain during surgery. The operation is possible to perform even if you are pregnant.

Before the operation:

You can live your life as normal prior to surgery and preferably eat something before you come to the clinic. Arrive in good time. You will be able to go home directly after the operation.

1,5 hours before scheduled surgery you should apply the anaesthetic cream that you received earlier onto the skin bridge in the genital area and take painkillers:

- 2 Alvedon (paracetamol) à 500 mg and 1 Ibuprofen 400 mg if you are not pregnant.

- only 2 Alvedon (paracetamol) à 500 mg if you are pregnant.

On the day of the surgery, go to Gynmottagningen (level 0, elevator B) where you met the doctor during your previous visit, and register at the reception desk.

After the operation:

- Rinse your genital area with water but avoid using soap
- You may find it more comfortable to rinse your genital area with water while you are urinating in the beginning
- Avoid having sexual intercourse for at least 4 weeks or until the wound has healed
- Avoid physical exercise for 3 weeks
- You may feel pain during the first days after the operation. Please use painkillers regularly for relief.
 2 Alvedon (paracetamol) à 500 mg 3 times daily. If you are not pregnant or allergic, you can add 1 Ibuprofen 400 mg 3 times daily. You will also receive an anaesthetic gel that relieves the stinging sensation. You can apply this gel several times every day.
- The pain should improve each day
- If necessary, you may take sick leave for up to one week after the operation



If your temperature should reach above 38 degrees Celcius, or if the pain gets worse, please call Gynmottagningen at **08-123 627 00** during daytime, or contact Gynakuten if irregular hours (evening, night or weekend).

You are also welcome to contact Gynmottagningen if you have questions prior to your surgery.





SÖDERSJUKHUSET

GYMOTTAGNINGEN, 08-123 627 00 SJUKHUSBACKEN 10, 118 83 STOCKHOLM, TEL 08-123 610 00 SL Buss 3, 4, 164, PENDELTÅG STOCKHOLM SÖDRA WWW.SODERSJUKHUSET.SE