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Why do you think this surgery is so popular now?

Many patients tell me that they had no idea it was even possible previously. I think also that the changing trend in so far as waxing the pubic area completely or near completely, coupled with internet exposure has resulted in more body awareness amongst certain individuals, who find the exposed inner labia aesthetically unpleasing. There is no erotic benefit to be gained from labiaplasty except perhaps by the individual being more relaxed about her genital appearance in sexual situations and thereby being less inhibited.

What about poor scarring? Can one get keloids after this surgery?

If all heals well, the scarring is barely visible, even to the trained eye. This is because the tissue is mucosal in nature (similar to the lining of the mouth) and so when it heals, and assuming there are no wound healing issues (as may be seen in smokers), the scar is very fine indeed and almost imperceptible. One cannot get keloids in mucosal tissues as there is no dermis.

What can go wrong?

Labiaplasty is a fairly simple procedure with a low complication rate. Unfortunately, because it looks technically much easier than it actually is, many doctors who are inadequately trained are performing this surgery with often disastrous outcomes, not all of which can be corrected. In short, it is vitally important for any prospective patient seeking this (or any other cosmetic surgery for that matter) to do their homework before embarking on this procedure and ensure, as best you are able, that the person offering this surgery is suitably qualified and has significant experience with labiaplasty.

Dr Skoll is a specialist plastic surgeon at the Christiaan Barnard Memorial Hospital in Cape Town. He graduated MBChB from The University of Cape Town in 1989 with first class honours, and later went on to complete a training programme in Plastic Surgery.

He has been in private practice since 1999. He is a full member of the APRASSA, ISAPS, ASPS (USA) and a Fellow of the Royal College of Surgeons in the UK, and the College of Surgeons of South Africa. He is an Associate Editor for Plastic & Reconstructive Surgery Journal (Global Open Edition) and a regular peer reviewer for Plastic & Reconstructive Surgery, the leading international Plastic Surgery Journal.

His private practice is predominantly cosmetic surgery with an interest in rhinoplasty and labiaplasty. On the reconstructive side, he has an interest in immediate prosthetic breast reconstruction as well as cleft lip and palate surgery, and does pro bono surgery with Operation Smile in Africa.

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