

# PERK

PLASTIC SURGERY  
BEVERLY HILLS

POST-OP | *Labiaplasty*

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## **“What will I see when I look into a mirror?”**

The labia will be swollen initially but the swelling will decrease over the next week. At first the stitches are quite visible but the visible stitches all dissolve within 10-14 days of surgery.

## **“How will it feel?”**

Sensations like numbness, sharpness, and burning are common during the healing process. These sensations may last several weeks and will gradually disappear. Some of the deep sutures under the skin can take up to three months to completely dissolve. For this reason, sensitivity issues such as itching for up to three months post-op is common. After that, sensation issues are very uncommon. The labia are very resilient and heal speedily. Pain that may require narcotic pain medicine typically lasts only a few days. After that ibuprofen (Motrin and Advil) is sufficient.

## **“When can I resume intercourse?”**

You should refrain from intercourse for at least 4 weeks after surgery. Even after 4 weeks the labia incisions may be sensitive and patients need to use caution and plenty of lubrication.

## **“When can I shower or take a bath?”**

You can shower the day after surgery. Please apply bacitracin ointment to the area after you shower. You should clean the area three times daily with water and apply antibiotic ointment to it.

## **“What can I do after surgery?”**

You can resume your normal activity except no sexual intercourse for 4 weeks. No heavy lifting of anything over 10 lbs for 3 weeks. I recommend that patients take a week off from work, but if you have a desk job, you can go back sooner. The post-op care is fairly easy and involves cleansing several times per day and the application of antibiotic ointment for a week. Most of the swelling and all of the external stitches have disappeared by two weeks.

## **“When can I drive?”**

You should never drive if you are still taking any pain medication other than Tylenol.

## **“When will I be able to return to work?”**

Depending on the type of work you do, you should be able to return to your job as soon as you are comfortable. If your job does not require heavy activity, you should be able to go back in one to two weeks.

## **“How much pain will I have?”**

The most discomfort that you will have lasts 7-10 days, sometimes a little longer. As you feel more comfortable, your need for medication will be less.

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## “What should I eat after surgery?”

A light diet is best for the day of surgery. Begin by taking liquids slowly and progress to soups or jello. You may start a regular diet, high in protein, the next day.

Limit spicy foods which cause gas or bloating. Though it is impossible to get rid of gas entirely, there are strategies to reduce it. Eat and drink slowly, chew thoroughly and cut down on carbonated drinks. Avoid sugar-free gums and sugar-free candies that contain sorbitol or zylitol – both sweeteners are poorly digested. People are all different so you will need to use your judgment on food choices.

## “What medications should I use?”

*Pain medication:* I will prescribe a pain medication for you. Follow the directions on the bottle for their use. The pain medication will make you feel drowsy. Have someone assist you in your home and do not attempt to drive while you are taking the pain medication. A few days after surgery most women will find that Tylenol will take care of the discomfort. Do not use aspirin for five days after the surgery. It is best to take pain medication with crackers, jello, etc. If you have no pain, do not take the medication. Alcohol and pain medication should not be taken together.

*Antibiotic:* You will be given an antibiotic. If you notice some vaginal burning and itching (vaginitis) as a result of the antibiotic used during and after surgery, our office or your family physician can prescribe Diflucan.

*Stool softener:* Narcotic pain medications can sometimes cause constipation. An over-the-counter stool softener (Colace) is recommended if you are prone to this.

Prune juice mixed with 7-Up (half and half) for mild constipation

If severely constipated use Miralax first as it is a mild but effective laxative, Phillips Milk of Magnesia, and fleet enemas (regular or oil retention) as a last resort.

*Anti-nausea medication:* Some nausea is normal in the first 24-48 hours following surgery. If you are nauseated, please take the anti-nausea medication.

## “Can I drink alcohol?”

Do not drink alcohol while taking narcotic pain medication after your surgery.

## “When will I be seen in the office after surgery?”

You will normally be seen in the office within one week of your surgery.

## “How will I know if I am having a problem?”

I NEED TO KNOW ABOUT THESE PROBLEMS IMMEDIATELY:

These are the complications that will require a change in your post-operative care:

**Hematoma** (blood collecting under your incisions) can occur within a few days of your surgery. The warning signs are:

- Severe pain that does not respond to medication
- Significant swelling
- Excessive or growing bruising

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**Infection** is rare. It is normal to have a very small amount of drainage from your incisions for one to 2 days. Signs of infection are:

- Increased temperature
- Increasing drainage from the incisions
- Increasing redness around the incisions

**Leg swelling** with or without associated pain may indicate a problem with the vein circulation in your leg(s). Although some swelling is to be expected due to your surgery, intravenous fluids given to you during the surgery and your decreased level of activity, this swelling is normally mild, painless and affects both legs evenly. If you have a large amount of leg swelling (either one or both legs) or if you experience pain in your legs contact the office immediately.

**Breathing problems** after surgery are rare but can be a serious complication. If you develop any chest and/or back pain or the feeling of being short of breath you must contact my office or be seen in the nearest emergency medical facility without delay.

**Medication reactions** may occur with the drugs prescribed for you. If you develop a skin rash, itching, vomiting, or diarrhea, stop taking your medication and contact my office.