

VULVAL SURGERY

Post-Operative Information

Vulval surgery refers to procedures performed on the external female genital area (the vulva) to diagnose or treat a range of conditions. These may include persistent skin changes, lesions, cysts, chronic pain conditions, or precancerous or cancerous changes.

The type of surgery can vary depending on your condition and may involve removing a small area for biopsy, excising a lesion, draining a cyst, or performing a wider excision. Vulval surgery is usually performed under local or general anaesthetic and may be done as day surgery or with a short hospital stay.

Your procedure item numbers may include:

- · FENTON'S PROCEDURE
- · EXCISION OF VULVAL CYST
- · HYMENECTOMY
- LABIOPLASTY
- · PERINEORRHAPHY
- MARSUPIALISATION of BARTHOLIN'S CYST
- · VULVAL BIOPSY
- · WIDE LOCAL EXCISION OF VULVAR INTRAEPITHELIAL NEOPLASIA (VIN)
- · BARTHOLIN'S ABSCESS
- LOCAL FLAP REPAIR

Most patients go home the same day, although on occasion patients may stay in 1-2 days. Please arrange for someone to take you home from hospital, as you won't be able to drive or take public transport alone.

Pain, Vaginal Discharge and Bleeding

On discharge you may experience some localised swelling and mild to moderate discomfort. Please take regular pain medication as required eg paracetamol or ibuprofen. Ibuprofen also has an anti-inflammatory effect which can assist with post-operative swelling.



To assist with the swelling you may also wish to apply a small icepack. Do not place the icepack directly but wrap it first in a clean cloth before applying to the area.

You may experience some bleeding after your procedure so it's advisable to use either a panty liner or sanitary pad until this loss subsides.

Not all procedures require stitches but if you do, stitches used in this area are usually dissolving ones and generally come away on their own around day 10 post operatively. Unfortunately, just before they come away they can start to cause some pulling. For this reason you will usually be given a post op appointment around 10 days post op so we can remove the stitches should they be causing you any problems.

Contact the Rooms or your GP if bleeding becomes heavy or you pass clots larger than a 50-cent coin. If you are soaking more than a pad an hour or feel lightheaded or dizzy please present to your closest emergency department.

Exercise and Physical Activity

You may gradually return to your usual level of activity as your energy allows. It is safe to resume normal daily tasks, including light housework, as tolerated. It is advisable to take things easy for a few days postoperatively to recover from the anaesthetic, avoid causing additional swelling and minimise damage to the healing wound.

If any form of exercise causes you significant discomfort, you must stop it immediately.

Time Off Work

You may need to take 3-5 days off work depending on the procedure you have had and your occupation. Please ask for a medical certificate should one be required.

Bathing and Swimming

You can shower as usual post operatively. Avoid baths for 4-6 weeks. Keep the vulva clean and dry after showering. If you experience burning after urinating, pour lukewarm water over the vulva and then pat dry.



Driving

Most patients can drive after 1-2 weeks if:

- No longer taking strong pain medications
- Can perform an emergency stop without hesitation or pain

Please check your car insurance policy for specific post-surgical requirements. Always follow your insurer's advice if they require a longer recovery period before driving.

Intercourse

Please refrain from sexual intercourse until any bleeding or discharge has stopped and you are feeling comfortable. This may take up to 2-4 weeks especially if you have had stitches.

Bowel Care

Constipation is common after surgery. Fasting, bed rest and medications for pain can all contribute to slowing of bowel function in the first few days. Constipation can lead to significant post op pain, so it is important to prevent and manage.

To avoid constipation:

- Drink plenty of fluids, mobilise and eat a healthy fibre rich diet as soon as possible post op
- Use over-the-counter options like Movicol (softens and bulks stool to naturally trigger a bowel movement) or Coloxyl (stool softener) <u>before</u> constipation becomes a problem.
- If you feel that your rectum is full but you are unable to evacuate it, **glycerine** suppositories may also help
- Sometimes a Microlax or fleet enema may be required, if constipation is severe.
 All of these medications can be purchased without a prescription from any pharmacy.

If constipation persists despite the above, please contact your GP.



TED Stockings

You do not need to wear compression stockings at home unless advised by your surgeon.

Pain Relief

You may be prescribed:

- Paracetamol and anti-inflammatories take regularly as directed
- **Stronger pain relief** (e.g. Tapentadol) use if pain isn't controlled by the above. We recommend taking this if your pain level reaches 3–4/10, rather than waiting until pain becomes severe.

Vaginal Medications

You may restart vaginal oestrogen after your post op visit.

Follow-Up Appointment

A follow-up appointment will be scheduled 1–6 weeks after surgery. Perineorrhaphy surgery will require a 6 week post op visit.

When to Seek Medical Advice

Please contact our Rooms or your GP if you experience any of the following:

- Increasing pain in the abdomen, pelvis or back, not relieved by taking analgesia, or is severe when you move, breathe or cough
- Persistent or heavy vaginal bleeding or discharge, or passage of large clots
- Offensive smelling vaginal discharge
- An elevated temperature or fever
- Shortness of breath or chest pain
- Swelling of your abdomen
- Nausea or vomiting that is worsening
- Pain, burning or stinging, or difficulty when passing urine



• Persistent or worsening redness, pain, discharge, increasing swelling or an enlarging bruise around your wound

Contact Details

Dr Leake, Dr Pontré and Dr Fitzgerald

During business hours:
 Non-urgent post-op questions:
 Call the Rooms at (08) 9389 5065
 Email: nurse@leake.com.au

Dr Karthigasu, Dr Robertson and Dr Julania

During business hours:
 Non-urgent post-op questions:
 Email: reception@karthigasu.com info@drpipparobertson.com reception@julania.com.au

Please note: emails are not monitored 24/7

Emergency requiring urgent care: Attend KEMH Emergency Department or your closest hospital.

In a medical emergency (e.g. difficulty breathing, chest pain, or very heavy bleeding): Call **000** immediately.