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**VAGINOPLASTY
WITHOUT VAGINAL CAVITY**
INFORMATION BOOKLET

PART C

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PART C

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PRESENTATION PART C

**PART C CONTAINS INFORMATION AND USEFUL TIPS ON YOUR POSTOPERATIVE CARE.
PLEASE BRING IT WITH YOU ON THE DAY OF YOUR SURGICAL PROCEDURE.**



1

WHAT IS NORMAL AFTER SURGERY

MODERATE SWELLING	It is normal to see swelling in the vulva. It takes at least four weeks before it subsides.
ECCHYMOSIS (BRUISES)	Bruises can extend from the navel to the hips and thighs. They take at least three to four weeks to heal.
ASYMMETRY OF THE LABIA MAJORA	The labia majora may be asymmetrical (irregular). Improvement will be seen as the swelling decreases, but the process can take up to a year.
CLITORIS	The clitoris can be difficult to see because of swelling and the presence of a blood clot. The clitoris can also be hidden under the labia minora. The color of the labia minora and the clitoral hood will change from red to pink about a year after surgery.
LIGHT TO MODERATE PAIN OR DISCOMFORT	You may experience more pain during the first few weeks after surgery.
LIGHT NUMBNESS	Trauma to the small nerve endings on the surface of the skin at the incisions made during the procedure may cause slight local numbness. Sensitivity will gradually return as the nerve endings heal and may take just over a year.
HEAT OR COLD HYPOSENSITIVITY	Your skin's sensitivity to heat or cold is now different because the nerves have been affected. You may not feel the temperature changes. Be careful not to burn yourself when exposing the area to heat or cold. Do not apply ice directly to the skin.
FEELING OF SMALL ELECTRIC SHOCKS	It is a sign that the nerve endings are healing. Ice, moisturizing cream, and massage can help alleviate these symptoms.

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DURING RECOVERY AT ASCLÉPIADE

2.1. PAIN MANAGEMENT

Pain will be more intense during the first 48 to 72 hours after the surgical procedure and following the removal of the dressings. The pain is mainly caused by swelling in the genital area. Ice, combined with medication according to our analgesia protocol, is an effective strategy.

Be aware that the greater your pain, the more difficult it will be to relieve and the more difficult the performing of your care will be.

2.2. RESUMING YOUR REGULAR MEDICATIONS

After your surgical procedure, you can resume your regular medications as prescribed by your surgeon.

2.3. GENITAL DRESSING

The removal of the genital dressing is an important moment. This is when you will first see your new genitals.

It is after the removal of the genital dressing that you may take your first shower normally.

2.4. URINARY CATHETER CARE

The urinary catheter used to empty your bladder, installed during surgery, will be removed by the nursing staff on day 5 or 6 of your recovery. However, you might return home with it. In this case, you will need to make an appointment with your doctor or nurse to have it removed. We will provide you with a medical prescription to this effect.

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DURING RECOVERY AT HOME

3.1. PAIN MANAGEMENT

Be sure to take your narcotic analgesics regularly as prescribed by your surgeon. If the pain is not sufficiently relieved, you can combine acetaminophen (Tylenol®) with the narcotic analgesics. Consult your physician if your pain is not sufficiently relieved.

Always follow your medical prescription and refer to your pharmacist or attending physician if necessary, to ensure safe use of acetaminophen.

It is forbidden to drink alcohol and to drive a motorized vehicle when taking analgesic narcotics.

Refer to the Analgesic Narcotics Guide that has been provided to you upon admission.

3.2. RESUMING OF YOUR REGULAR MEDICATION

Do not take acetylsalicylic acid (Aspirin® or AAS) or anti-inflammatory drugs such as Advil® or Motrin® for 2 weeks after surgery.

3.3. RESUMING HORMONE THERAPY

After surgery you will need to meet with your hormone prescriber to determine what your hormone therapy protocol will be.

3.4. STITCHES

Your surgical wounds have been closed with dissolving stitches. Their complete dissolution can take from 30 to 90 days. There is no need to concern yourself with their removal.

3.5. SCARRING AND INFECTION

Wound healing is a complex process that takes about a year and is made up of a series of steps.

Beginning as soon as you return home, check your incisions for infection daily. Continue to do so until your wounds are completely healed.

Infection signs:

- redness
- sensation of heat
- sensitivity
- swelling
- discharge of pus with a foul odor
- increased pain in the area of the surgery
- shivering and a fever exceeding 38,5°C or 101°F for more than 24 hours.

Contact your doctor if you have these signs of infection.

3.6. YELLOWISH TISSUE

Moist yellowish tissue might form on your wounds, especially in the incisions of the labia majora. This tissue is made of cellular debris. This is a normal process in which the body removes debris from the wound to allow new cells to form new skin.

Too much of this tissue could delay the healing process. It is important to clean your wounds well to naturally remove debris, dry them well, and leave them in the open air as often as possible. Moisture can increase the development of this yellowish tissue. A dry crust should form and will naturally detach from the skin.

If you notice a blackish patch or the yellowish tissue does not diminish, contact us.

3.7. SCAR MASSAGE

To stimulate blood circulation and increase the flexibility of the tissue surrounding the operated area, it is important to start massaging the scars as soon as they are closed.

Massage in the direction of the incision and in a circular motion with a Vitamin E cream or silicone gel that you have already purchased. (see Part B point 2.7) Never apply oil to your incisions.

Exploring and massaging the genital area improves nerve recovery and stimulates the recovery of sensation.

Remember that it is important to wash your hands before and after touching your genitals.

We advise you never to have your genital area pierced.

3.8. URINARY CATHETER CARE

When the catheter is removed, your urine stream may be altered due to swelling and may flow irregularly for several months. If the problem persists beyond six months, contact us.

HOW SHOULD I CARE FOR MY URINARY CATHETER?

If you leave with a urinary catheter, it is important to follow the instructions below to ensure proper urination flow and prevent infections:

- Always wash your hands before and after handling the urinary catheter;
- Clean the area of the urinary meatus and around the catheter twice a day with water and unscented mild soap, always making sure to clean the genital area from front to back. Rinse thoroughly and pat dry with a clean towel.

When taking your sitz bath, make sure the catheter is not soaking in water. The catheter should be attached to your abdomen with a Band-Aid and pointing upwards;

- Wear white cotton underwear;
- Never pull on the catheter.

HOW CAN I PREVENT URINARY TRACT INFECTIONS?

Wearing a urinary catheter increases the risk of developing a urinary tract infection. It is important to follow your surgeon's recommendations to prevent them. Here are the most important recommendations to follow.

PREVENT URINARY TRACT INFECTION	RECOGNIZING THE SIGNS AND SYMPTOMS OF URINARY TRACT INFECTION
<ul style="list-style-type: none"> • Empty the bladder regularly and completely, and as soon as you get up in the morning, every 2-3 hours during the day, and in the evening before bedtime; • Drink 2 to 3 litres of water/day unless otherwise advised by your doctor. Cranberry juice can help prevent infections by increasing the acidity of the urine; • Avoid alcoholic beverages and beverages containing caffeine (tea, coffee, soft drinks); • Add probiotics such as yogurt to your daily diet to improve the bacterial flora; • Thoroughly clean the catheter according to the maintenance tips presented above. 	<ul style="list-style-type: none"> • An intense and frequent need to urinate and in small quantities; • Burning sensation when urinating; • Urine is cloudy, pinkish or brownish in color and smells bad; • Pain in the lower abdomen and/or back; • The presence of chills and fever exceeding 38°C or 101.4°F for more than 24 hours.

3.9 HYGIENE

TAKE A SHOWER EVERY DAY:

1. Use a mild, fragrance-free, alcohol-free soap (Dove or Ivory) to cleanse the genitals. Use your fingers to gently cleanse each of the folds of the genital area;
2. Rinse off excess soap well;
3. Carefully pat dry the genitals with a clean towel, then allow them to air dry for as long as possible.

FOR MORE COMFORT:

- Wear comfortable white cotton underwear that is not too tight to avoid rubbing the fabric on your genitals;
- place a gauze dressing on wounds that have not healed.

From the second month or once your wounds are well healed, you can shave or wax your genitals.

Always keep the genital area clean and dry. Leave the genitals to the open air when you are in bed.

3.10. SITZ BATH

The sitz bath consists of cleaning the genital area by immersion in warm soapy water.

You will need to take two sitz baths a day for the first two months. At the third month, you can stop.

*You may not feel the temperature changes. Be careful not to burn yourself.

TAKING A SITZ BATH

- 1 Clean the genital area from front to back with a “Baby Wipe”;
- 2 If you still have your urinary catheter, make sure not to leave it soaking in water. Hold it with your hand while sitting on the sitz bath and throughout the soaking time;
- 3 Let your genitals soak for 10 minutes, making sure they touch the water. Spread your labia majora and clean each of the folds of the genital area thoroughly;
- 4 Carefully pat the genitals dry with a clean towel and let them air dry for as long as possible.

SITZ BATH IN A BATHTUB - RECOMMENDED

- 1 Make sure the bathtub is clean and well rinsed.
- 2 Add 15 ml of fragrance-free, alcohol-free liquid soap (Dove or Ivory) to the warm water of your bath;
- 3 Take the sitz bath.

SITZ BATH ON THE TOILET (IN CASE YOU DON'T HAVE A BATHTUB)

GETTING READY

- 1 Clean the toilet seat with a Lysol-type wipe and wash your hands;
- 2 Make sure your sitz bath is clean, if not, clean it.
- 3 Pour 5 ml or 1 teaspoon of unscented, alcohol-free liquid soap (Dove or Ivory) into the sitz bath and add warm water to fill it to the maximum, then place the sitz bath on the toilet;
- 4 Wash your hands;
- 5 Take the sitz bath.

CLEAN YOUR EQUIPMENT

- 6 Clean your sitz bath with dishwashing soap. Never use an abrasive sponge;
- 7 Let it dry in a clean, dry place;
- 8 Wash your hands.

3.11. REST AND DAILY ACTIVITIES

A balance between rest and daily activities will be essential. Take time to rest and resume your daily activities gradually and according to your tolerance.

IMPORTANT

- For the first month after the surgical procedure, avoid lifting objects weighing more than 4.5 kg (10 lbs.).
- Wait two months after your surgery to engage in physical activities and sports.
- We strongly advise you to walk at least a total of one hour a day as soon as your condition allows it.

Two months after your surgery, and if your wounds are well healed, you will be able to swim in a pool, hot tub, or lake.

3.12. BOWEL ELIMINATION

Taking narcotic analgesics as well as a decrease in physical activity contributes to constipation, which can lead to bleeding or the sudden opening of your wounds when you have a bowel movement.

Here are some guidelines to avoid constipation:

- drink at least 2 to 3 litres of water per day, unless otherwise noted by your surgeon;
- increase your daily consumption of fibre (fresh or dried prunes, or prune juice, All-Bran Buds-type cereals, fruits and vegetables, etc.);
- reduce your intake of foods high in fat and sugar;
- reduce your consumption of caffeinated beverages like coffee, tea;
- avoid soft drinks and alcohol as they contribute to dehydration;
- establish a physical activity routine;
- take acetaminophen (Tylenol®) on a regular basis to reduce your narcotic intake;
- take Senokot® as needed, a natural laxative, as prescribed by your surgeon.

Each time you will need to thoroughly cleanse the perineal and anal area from front to back using disposable wet towels.

If the problem persists, consult your pharmacist.

3.13. DRIVING

We advise you to wait at least two weeks after your surgery before driving a vehicle and are thus able to carry out unpredictable movements without restriction and to avoid excessive pressure on your genitals and pain.

When you start driving again, do so over short distances. If you must drive a long distance, make frequent stops to walk and urinate.

Remember that it is illegal to drive a motor vehicle while taking narcotic pain medication.

3.14. SEXUAL INTERCOURSE AND ORGASM

Please wait at least 6 to 8 weeks before having oral sex or sex with anal penetration.

Reaching orgasm is different for each person. Take time to explore and feel your genitals to rediscover your erogenous zones.

4

POSSIBLE POSTOPERATIVE COMPLICATIONS

4.1 URINARY TRACT INFECTION

Vaginoplasty is a procedure that changes the anatomy of your urinary system. As a result, you will be at greater risk of developing a urinary tract infection.

Please refer to the table in section 3.8 of this information booklet for more information on the prevention and detection of a urinary tract infection.

As soon as you suspect a urinary tract infection, please consult your family doctor.

4.2 4.2. HYPERGRANULATION

During the normal healing process, excess granulation tissue may be found on the outer region of the vulva. This is commonly referred to as hypergranulation.

If visible, the hypergranulation tissue will appear to be bright red, shiny, granular in texture and will bleed easily.

Hypergranulation slows down the normal healing process.

If you suspect the presence of hypergranulation, consult your family doctor for appropriate treatment.

Your surgeon prefers treatment with silver nitrate combined with a specific anti-inflammatory cream.

Do not hesitate to contact us if you have any additional questions.

4.3 DEHISCENCE (REOPENING) OF THE WOUND

Wound dehiscence is an opening at the surgical incision. It can occur in the first few weeks after surgery.

If you find an opening in the incision, be aware that there is no surgical procedure indicated to close the wound. The healing period will be longer, but the wounds will naturally close from the inside out.

In this case, it will be essential to clean the open area with a mild soap twice a day and dry it thoroughly.

In the event of a greenish discharge from the wound, please consult your family doctor immediately.

5 POSTOPERATIVE FOLLOW-UPS

IN THE WEEKS FOLLOWING YOUR RETURN HOME, WE WILL FOLLOW UP BY EMAIL TO ENSURE THAT YOUR CONVALESCENCE GOES SMOOTHLY.

WITH THE SURGEON

If you live in or near the province of Quebec, a consultation with your surgeon will take place one month after your surgery. Please contact the GRS Montréal team for a follow-up appointment with your surgeon by calling 514 288-2097.

WITH YOUR FAMILY DOCTOR

- Continue your annual visits to your family doctor;
- Have your prostate checked every year.

WITH YOUR DOCTOR PRESCRIBING HORMONE THERAPY

Consult your hormone prescriber two months after surgery to ensure that the prescription is adjusted.

WITH YOUR THERAPISTS

You are encouraged to continue your follow-ups with your therapists. They will be able to help and support you if you experience adjustment difficulties during the post-operative period.

6 WHO TO CONTACT DURING YOUR RECOVERY AT HOME

You may reach the Maison de convalescence Asclépiade for any questions about postoperative care or if your family doctor has any questions about your surgical procedure. Please note that there is a 24 to 48-hour response delay.

FOR AN EMERGENCY, DIAL 911 OR GO TO THE EMERGENCY ROOM OF THE HOSPITAL NEAREST YOU.

MAISON DE CONVALESCENCE ASCLÉPIADE 514 333-1572
..... ASCLEPIADE@CMCMONTREAL.COM
EMERGENCY SERVICES IN YOUR AREA QUÉBEC : 811
EMERGENCY SERVICES IN YOUR AREA CANADA : 911
YOUR FAMILY DOCTOR _____
YOUR PHARMACIST _____
COMMUNITY HEALTH SERVICES CENTER
IN YOUR REGION (QUEBEC: CLSC): _____

COMMUNITY SERVICES

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DETACHABLE CHECKLIST

MONTH 1			
AM	NOON	PM	NIGHT
• Shower	• Sitz bath		• Sitz bath

MONTH 2		
AM	PM	NIGHT
• Shower	• Sitz bath	• Sitz bath

MONTH 2 – MESSAGES AND EXPLORATION
<ul style="list-style-type: none"> • Start massage of the incisions. • Start exploring the clitoral region with your fingers.

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