The Combined Vaginoplasty Technique: Outcomes after MTF Sex Reassignment Surgery - a Prospective Study

Nikolaos A. Papadopoulos1,2, Dmitry Zavlin1,3
1. Dept. of Plastic Surgery & Hand Surgery, University Hospital Rechts der Isar, Munich Technical University, Munich, Germany
2. Division of Plastic Surgery and Burns, Alexandroupoli University General Hospital, Democritus University of Thrace, Alexandroupoli, Greece
3. Institute for Reconstructive Surgery, Houston Methodist Hospital, Houston, Texas, USA

Introduction

Treatment guidelines for transgenders are published by the World Professional Association for Transgender Health (WPATH) and include therapeutic options, such as mental care counseling or psychotherapy, hormone replacement therapy (HRT), and surgical interventions. Male-to-female (MTF) sex reassignment surgery (SRS) comes with certain operative risks and is thus generally considered the last step for transsexuals by the World Professional Association for Transgender Health (WPATH) and include therapeutic options, such as mental care counseling or psychotherapy, hormone replacement therapy (HRT), and surgical interventions. Male-to-female (MTF) sex reassignment surgery (SRS) comes with certain operative risks and is thus generally considered the last step for transsexuals.

Surgical Conclusions

Male-to-female sex reassignment surgery using our described combined technique leads to:

- Stronger feeling of femininity
- Improved sexual life
- Increased frequency of Intercourse
- High satisfaction with postoperative aesthetic and functional results
- Clinically favorable vaginal width and depth

Secondary operative procedures are common to achieve best possible outcomes.

Further prospective clinical studies are encouraged to establish a state of the art surgical vaginoplasty technique and incorporate the superior one in any future treatment guidelines.

References

- Lawrence AA. Sexuality before and after male-to-female sex reassignment surgery. Arch Sex Behav 2009;38:440-450
- Persson S, Stangier DJ, Dörmann P. Vaginoplasty in male transsexuals using penile skin and a urethra flap. BJU Int 2000;86:843-850

Objective

The objective of this research study is to present the surgical outcomes of MTF SRS using our newly modified combined surgical technique and to evaluate the patients’ postoperative satisfaction compared to their baseline data.

Methods

All patients undergoing their first stage of MTF SRS were asked to join an observational ethical committee approved research study. First, they filled out a preoperative self-developed indication specific questionnaire set (T0). Next, their second stage of SRS was performed roughly half a year later. 6 months after that second surgery, patients filled out their second questionnaire set (T1).

Ultimately, 40 patients (n=10) completed the T0 and T1 question sets and, of those, 23 were physically examined postoperatively by the same physician. Any statistical analyses were performed using SPSS V. 21 (IBM, Armonk, NY, USA) using a level of significance p < 0.05.