

COMMENT ON A CERCLAGE METHOD FOR HYMENOPLASTY

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Hymenoplasty is a surgical procedure whereby the hymenal ring is surgically altered via small tightening revisions to minimize the size of the vaginal aperture. This operation can be performed for cosmetic, functional or sexual reasons, or for a combination of these [1].

There are various techniques used for this operation, some of which have been published. The cerclage method for hymenoplasty described by Ou et al [2] is interesting in several respects, and we would like to thank the authors for sharing their experience and technique with us. This operation, although ethically and culturally controversial, is an acceptable method of plastic and reconstructive surgery in many countries [3,4]. It is mostly performed in sociocultural environments where virginity is considered to be very important, and where it is regarded, unfortunately, as a sign of purity, dignity or honor in women. There have been circumstances where defloration without marriage has led to suicide or homicide of the women concerned.

In such countries and sociocultural environments, this operation puts pressure on both the patient and the physician; it is performed secretly and is usually quite expensive. Because of the secrecy involved, patients and physicians deny its occurrence for the above-mentioned reasons, and it is, therefore, difficult to publish the methods and statistics relating to these operations. In countries where bleeding at first coitus is accepted as a sign of pureness of the woman, the operation is performed a few days before the expected re-defloration, usually corresponding to the wedding day, when bleeding after intercourse is expected.

However, the outcome of such an operation cannot be guaranteed. A search made using the major internet search engines and related keywords can reveal the extent of this operation worldwide.

Ou et al [2] stated that the patients in their series reported no regrets concerning the operation, and none had apparently experienced any physical complications or adverse effects. However, whether or not bleeding occurred at intercourse following the operation was not mentioned. This is an important point, since it is an expected outcome of the surgery.

Finally, as with all other types of surgery, genital cosmetic surgeries (e.g. hymenoplasty, labiaplasty, perineoplasty, vaginoplasty) should be adequately described to the patients, and the risks and expected outcomes should be fully explained [1]. For hymenoplasty, the possibility of not bleeding during the following intercourse should be discussed with the patient ahead of the operation, to prevent both frustration of the patients and any possible medicolegal consequences.

References

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