Female Genital Appearance:

What is normal?

Information for patients

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Female genitalia in the media

Although female nudity is now common in the media (particularly the pornography industry), accurate representations of female genitalia are rare.

Changing habits such as shaving and waxing pubic hair can irritate sensitive skin and also make the labia more visible.

What to do if you think your vulva is abnormal

See your GP who should examine you. He or she is most likely to reassure you that you are normal. If you continue to be unsure, you may be referred to a gynaecologist for an assessment. Most women are reassured of their normality and that no treatment is needed.

Variation in the appearance of labia minora
All these vulvas are entirely normal

However, body insecurities have extended to vulval appearance for some women and girls, who are not aware of the very wide variations in what is normal and healthy.

Cosmetic Genital Surgery

This is not generally available on the NHS.

Surgery available privately includes labiaplasty (labia reduction surgery), clitoral reduction and liposuction amongst others.

There is no evidence that surgery improves physical or psychological symptoms in the long term. Many of the claims in online advertisements are unproven, because quality, detailed research has not been done.

All surgery involves risks:

- Bleeding.
- Infection.

With labiaplasty:

- There will be a scar.
- Scarring could reduce sensation

- Some women require further surgery because of complications.
- Some women will feel unhappy with the outcome.
- The surgery cannot be undone

Interesting resources:

BBC news article. ‘New warning on “perfect vaginas:”’
http://news.bbc.co.uk/1/hi/8352711.stm

The Great Wall of Vagina Sculpture:
www.brightonbodycasting.com/design-a-vagina.php

Femalia by Joani Blank

The image ‘Variation in the appearance of labia minora’ is used with permission from the paper: Lloyd J, Crouch NS, Minto CL, Liao LM, Creighton SM. Female genital appearance: ‘normality’ unfolds. BJOG 2005; 112: 643-646

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