



# GENDER CHANGE

Sex Change/ Sex Reassignment Surgery (SRS)/ Gender Reassignment Surgery (GRS)/ Male to Female Surgery/Gender Confirming Surgery

# MALE TO FEMALE SURGERY: A LIFE CHANGING PROCEDURE

Gender Change or also known as Sex Reassignment Surgery (SRS) or Gender Reassignment Surgery (GRS) in the plastic surgery world aims to create a functional vagina with an external appearance as close as possible to that of a genetic female, together with the associated sensations and feelings.

## *Surgical Procedure*

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This procedure is a combination of a penile skin inversion and an immediate full thickness skin graft. The first stage of sex reassignment surgery starts at the creation of a vaginal tunnel or also known as vaginoplasty. The surgeon will then remove the penis (penectomy) and testes(orchidectomy) followed by construction of clitoris, clitoris hood and labia minora (labiaplasty). The vaginal canal and opening is created beneath the urethral opening and prostate gland.

The second stage of gender reassignment is the scrotal skin graft that will be used as the lining of the new vaginal tunnel. Vaginal depth is of concern to most patients. The most important factor in creating this depth is the amount of penile shaft skin. The surgeon's technique lengthens the depth of the vagina by using the full thickness skin graft from the scrotal skin. The average vaginal depth ranges from 4-5 inches.

Hair on the scrotum must be removed so that the skin graft is placed at the distal end of the penile skin flap. This technique can lengthen the depth at least 2 more inches. A portion of the glands at the head of the penis, where the nerves and vessels are located, is converted into a clitoris. In so doing, the clitoris will be functional in sensation as well as in appearance.

The excess erectile tissue around the urethra should be removed in order to avoid symptoms that stem from engorged erectile tissue during sexual arousal that may result in the narrowing of the vaginal opening.

Colon transposition is used for patients who need more depth (exceeding 8 inches).

## *Hospital Admission*

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Since this is considered a major operation, the patient is required to be admitted in the hospital for 14 days

## *Duration of Operation*

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The 1<sup>st</sup> stage of operation will take six to eight hours followed by second stage after 7 days.

### *Anaesthetic*

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Gender Reassignment must be performed under General Anaesthesia wherein a patient is asleep during operation.

### *Criteria*

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Patient must meet the following requirements:

- Patients must be at least 18 years old. Patients under 20 years old will require parental permission.
- Patients must secure an approval or letter of recommendation from a psychiatrist (MD), psychiatric social worker (PhD), or clinical psychologist (PhD), and must provide a referral letter.
- Transition History or Personal Background

### *Pre Operative Care*

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In order to make sure that you can undergo Gender Change as safely as possible, the following preparatory activities are performed:

- Extensive health check up within three months prior to SRS to rule out any potentially preventable problems.
- A detailed history and blood tests: CBC, HIV Electrolytes, FBS, Creatinine Urinalysis Alkaline Phosphatase, Chest X-ray SGOT, LDH, EKG
- Patients must be confirmed by a private physician to be free from serious medical diseases
- Hormone treatment must be discontinued at least fourteen days prior to surgery. Hormones should not be used to reduce the risk of thrombosis (blood clots).
- Oral tablets should not be taken two weeks prior to surgery and injectational medication should not be used for four weeks prior to surgery. Oral antiandrogens should not be taken three days prior to surgery (four weeks if injectables).
- Inform your surgeon of any allergies, all medical conditions, and any medication that you are taking (both prescription and non-prescription).
- Notify your surgeon if you are suffering from diabetes, high blood pressure, heart disease.
- Avoid aspirin and any medication containing aspirin or brufen for two weeks before surgery.
- Avoid smoking for two weeks as smoking can affect body's reaction to the anaesthetic and slow down the healing process.

### *Post Operative Care*

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After Sex Change, the patient may experience some pain associated with the surgery. When the procedure is completed, a patient is advised of the following:

- **Bed rest for approximately one to two days.** Walking on standing on the floor is not allowed as this may aggravate bleeding.
- **Medications.** Prescriptions for pain medication that the patient will take as needed, and antibiotics that will be taken for several days to decrease chances of infection.
- **Catheters.** Two catheters will be in placed after the surgery. The first one is to drain your urine from the bladder called Foley's catheter and VAC (Vacuum Assisted Closure) to enhance granulation tissue growth, promote healing, and drain blood and fluid from the surgical site to reduce swelling.
- **Post op dressings.** The surgeon will give directions on bathing and changing of dressing.
- **Swelling and bruising.** The extent of the post operative swelling and bruising depends on whether you tend to bruise or swell easily. Every person is different. It is necessary to not perform any strenuous activity after surgery to avoid putting unnecessary strain on the wound. Tension can stretch your incisions and increase scarring. The surgeon will discuss when a patient can return to their normal daily activities.
- **Recovery.** The neovagina can function within 6 weeks.

### *Results*

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After 6 weeks, the patient should be able to engage in neovaginal intercourse. During sexual arousal, there is some vaginal lubrication - though in most cases the patient should apply lubricant jelly at the vaginal opening prior to intercourse (as with dilation).

Typically, during arousal, mild swelling of the urethral meatus from excess corpus spongiosum may occur which can be corrected for cosmetic improvement if the patient returns to Thailand.

During sex, sensation at the vaginal opening, inner labia, and neoclitoris can be comparable, and certainly more sustained after climax, than previously in the male sex. It is essential to avoid any strenuous activity which can complicate recovery.

### **Note**

If you are HIV positive, then you are a risk to hospital personnel. For this reason, you are asked to pay an additional 30% of the original charge.