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LASERS

## GENITAL LASER SCULPTURE WITH PUNCTUAL USE OF FRACTIONAL CO2 LASER COMBINED WITH CO2 SURGICAL VAPORIZATION

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Background: Prior to laser techniques, perineoplasty was the approach for feminine genital rejuvenation, leaving patients unattended in functional/aesthetic desires, and high incidence of adverse effects. Labiaplasty has also brought disappointment. The Brazilian technique "Laser Escultura Genital (LEG)"/ Genital Laser Sculpture brings a new perspective in female genital remodeling, combining fractional CO2 laser for neocollagenesis (with hyperfluent thermal punctures in the flaccid areas) and CO2 vaporization to remove the excess skin, followed by stitching.

Observation: 188 patients with anesthetic findings such as hypertrophic and/or asymmetric labia, hyperchromia, pubic or clitoris' prepuce hypertrophy, occluded clitoris' glans, enlargement of the vaginal opening and extreme flaccidity in the external female genitalia were enrolled, all with surgical indication due to excess skin. After genital epilation, asepsis and intumescent anesthesia, Deka Smartxide2 Laser ultrapulse was used (no conflict of interest), 8-12W in continuous mode, vaporizing the excess labia and/or clitoris' prepuce, followed by suture. Also in continuous mode and 2mm or 4mm surgical tip (2-4W, proportionally to aimed neocollagenesis), a refinement technique (LEG) involving punctual thermal shots distanced by 2mm in the whole external genitalia was performed. Only one session was enough for 179 (95.2%) of patients, with satisfactory results and simple wound care and infection prophylaxis. The remaining subjects underwent a new refining non-surgical LEG session in 2 months. Only 3 patients had complications, 2 of which candidiasis, and 1 of which dehiscence.

Key message: Reconstruction of external female genitalia is totally feasible with CO2 fractional and regular laser. Combining LEG technique with CO2 vaporization surgery has been safe, cost effective and satisfactory in this private practice for the past 6 years and can be replicated worldwide. The treatment may also be combined with fillers, although the





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retraction of the skin and the neocollagenesis already offer a very satisfactory result. Intravaginal laser may be complementary.



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