

# The Role of Pornography, Physical Symptoms, and Appearance in Labiaplasty Interest

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## Abstract

**Background:** With the American College of Obstetricians and Gynecologists reaffirming its 2007 opposition to labiaplasty in 2019, the procedure continues to be controversial. Particular emphasis on pornography as a major influencer on women seeking labiaplasty contributes to its controversy and distracts from other motivations. Few articles have established pornography's influence relative to functional and appearance-related symptoms.

**Objective:** The objective of this study was to investigate the relative influence of pornography on women's decision to seek labiaplasty relative to other factors compared with a control cohort.

**Methods:** In this prospective study, 124 consecutive patients consulting about labiaplasty and a control cohort of 50 women were questioned about 11 labia-related symptoms and the possible influence of pornography.

**Results:** The mean age was 34.2 and 38.9 years in the labiaplasty and control cohorts, respectively. Women in the labiaplasty cohort had on average 2.8 of the 6 queried physical symptoms and 3.2 of the 5 queried appearance-related symptoms compared with control patients who reported an average of 0.3 of the 6 queried physical symptoms and 0.2 of the 5 queried appearance-related symptoms ( $P < 0.001$ ). Less than one-half (47% of the labiaplasty and 42% of the control cohort) never viewed pornography. Pornography was not an influential factor to seek labiaplasty in 42% of the labiaplasty cohort and 54% of the control cohort. A minority (11% in the labiaplasty cohort and 4% in the control cohort) said that pornography influenced them to seek labiaplasty. There were no statistically significant differences between these 2 groups.

**Conclusion:** Pornography influences some women to seek labiaplasty, but relative to other motivating factors its role is minor.

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The number of labiaplasty procedures performed in the United States during the years 2011 to 2018 has grown over 600% from 2142 to 12,756 (Figure 1).<sup>1</sup> The increase in the procedure has been attributed to several factors, including physical symptoms, sexual function, appearance, negative comments, and the influence of digital media, including pornography.<sup>2-29</sup>

Physical symptoms associated with elongated labia include pain, itching, twisting, and dyspareunia.<sup>2,28,29</sup> Nearly all labiaplasty patients are self-conscious about the appearance, and the majority experience a negative impact on their self-esteem and intimacy.<sup>2,28,29</sup>

A number of studies have investigated potential cultural influences on women seeking labiaplasty. Sharp et al<sup>15</sup> found that women considering the procedure saw more

labia images in the media and internalized their idealized form. Placik and Arkins associated the increase in demand for labiaplasty with Playboy magazine's shift from featuring breasts to featuring female genitalia.<sup>16</sup> Other studies have identified cosmetic genital surgery advertisements and

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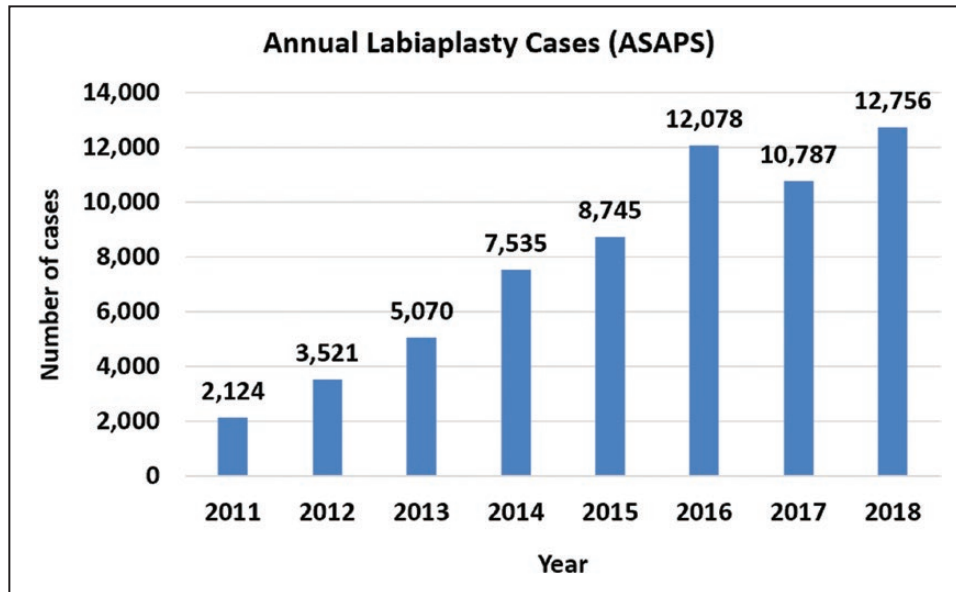


Figure 1. Annual labiaplasty cases.<sup>1</sup>

pornography as directly influencing women's desire for labiaplasty.<sup>9,17,18,30,31</sup> Pornography rating boards are felt to play a role, as some require labia to be "tidy" slits so as not to be "too offensive."<sup>31</sup> A number of authors, both lay and physician, posit that labiaplasty patients are socially vulnerable women wanting to look like porn actresses, sex objects, or prepubescent girls.<sup>8-10,19-23</sup> Compounding these claims, the lay press commonly cites pornography, with photographically and surgically altered labia, as a driving force for the growth in labiaplasty numbers.<sup>23-27,30,31-36</sup>

Despite these reports, several small studies have shown pornography to be an unlikely primary labiaplasty motivator. Crouch et al<sup>8</sup> found that among 33 women who underwent the procedure, only 12% reported even watching pornography. Although this statistic might not be representative of labiaplasty patients at large, given that 24% were age 16 years or younger, Sharp et al<sup>15</sup> reported a similar result in interviews with 14 adult labiaplasty patients. Even though 78.6% of these women were exposed to pornography, only 14.3% were influenced by it. In another study, Sharp et al<sup>11</sup> compared 35 women desiring labiaplasty with 30 who were not, and they found "unexpectedly" that the 2 groups did not differ in their exposure to pornography. Jones and Nurka found women who viewed pornography to be more open to labiaplasty but concluded it was unlikely to be a primary driver.<sup>37</sup>

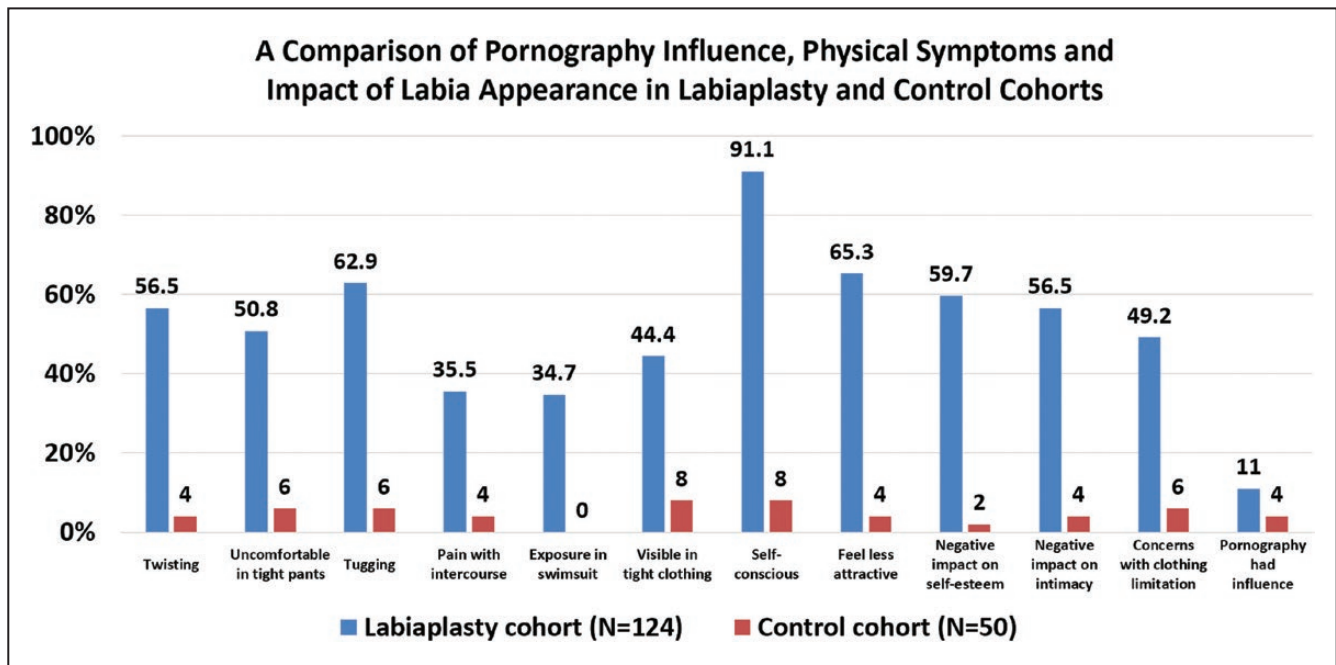
Pornography appears to be the most sensational and controversial among all online images that may influence women to seek labiaplasty. No study to date, to our knowledge, has investigated the degree to which pornography motivates women to seek labiaplasty compared with other factors. The purpose of this study was to investigate the

relative influences of physical symptoms, appearance concerns, and pornography's influence on patients consulting about labiaplasty compared with a control cohort.

## METHODS

To investigate the relative roles of physical symptoms, appearance concerns, and the influence of pornography as motivational factors for women seeking labiaplasty, a qualitative questionnaire (Appendix A) was given prospectively to 124 consecutive patients of majority age at the time of their labiaplasty consultation between January 1, 2016 and June 30, 2018. Additional surveys were administered to a control group comprised of 50 consecutive non-labiaplasty female patients in the same aesthetic practice (Appendix B). The members of that cohort were asked to serve as a control for a labiaplasty study. Patients were asked questions about labia symptoms without correlating them to a hypothetical labiaplasty. Only the last question regarding the influence of pornography made mention of the procedure. After patients gave verbal permission, surveys were administered anonymously in paper format and distributed to patients as part of their intake paperwork by the medical assistant. Patients completed the surveys privately in an examination room.

Institutional review board approval was obtained by Western IRB, and written informed consent was obtained by the senior surgeons (H.J.F. and F.L.C.). Surveys were completed privately in an examination room. Survey responses and demographics were documented in a study patient log and stored in a password-protected computer. Surveys were administered once preoperatively, without



**Figure 2.** A comparison of pornography influence, physical symptoms, and impact of labia appearance in labiaplasty and control cohorts.

retesting; therefore, no reliability testing was performed. Data are presented as frequency, means, and standard deviations. Student's *t* tests were performed to compare parametric values between response groups. Chi-squared tests were performed for nonparametric values.

## RESULTS

The mean age of the labiaplasty cohort was 34.2 years old (range, 18-63 years), with a standard deviation of 11.1 years. The mean age of our control cohort was 38.9 years old (range, 22-78 years), with a standard deviation of 11.7. Among the control cohort, 22% had an interest in the face, 17% the breast, and 21% the body. Some patients had more than one interest.

Of 124 women consulting about labiaplasty, nearly all (91%) were self-conscious about the appearance of their labia compared with 8% of the 50 women in the control cohort. Two-thirds of the labiaplasty cohort (65.3%) felt less attractive, over one-half (59.7%) experienced a negative impact on their self-esteem, and 56.5% experienced a negative impact on intimacy compared with just 4%, 2%, and 4%, respectively, of the control cohort ( $P < 0.001$ ). Elongated labia limited clothing choices in one-half of patients (49.2%) compared with 6% of the control cohort ( $P < 0.001$ ) (Figure 2).

Regarding physical symptoms, among the labiaplasty cohort, over one-half (62.9%) experienced tugging with

intercourse, and 56.5% experienced twisting of their labia in clothing compared with 6% and 4%, respectively, of the control cohort ( $P < 0.001$ ). One-half (50.8%) said their labia made wearing tight pants uncomfortable, less than one-half (44.4%) noticed their labia were visible in tight clothing, and one-third (34.7%) experienced exposure of their labia in a bathing suit compared with 6%, 8%, and 0%, respectively, of the control cohort ( $P < 0.001$ ) (Figure 2).

In considering drivers for undergoing labiaplasty, women within the labiaplasty cohort had on average 2.8 of the 6 queried physical symptoms and 3.2 of the 5 queried appearance-related symptoms. In comparison, control patients reported an average of 0.3 of the 6 queried physical symptoms and 0.2 of the 5 queried appearance-related symptoms ( $P < 0.001$ ) (Table 1).

Less than one-half (47% of the labiaplasty and 42% of the control cohort) never viewed pornography. Pornography was not an influential factor to seek labiaplasty in 42% of the labiaplasty cohort and 54% of the control cohort. A minority (11% in the labiaplasty cohort and 4% in the control cohort) said that pornography influenced them to seek labiaplasty. The 2 groups did not statistically significant differ (Figure 3). In considering only those patients who viewed pornography, 20.8% of labiaplasty patients were influenced by it to have surgery compared with 6.9% of controls.

Correlation coefficients calculated between pornography viewership and age, number of reported physical

**Table 1.** Physical and Psychological Symptoms Reported by the Labiaplasty and Control Cohorts

	Labiaplasty cohort (n = 124)	Control cohort (n = 50)	P
Age (y)	34.2 ± 11.1	38.9 ± 11.7	0.02
Physical symptoms (% cohort)			
Twisting	56.5	4	
Uncomfortable	50.8	6	
Tugging	62.9	6	
Pain with intercourse	35.5	4	
Exposed in swimsuit	34.7	0	
Visible in tightfitting clothing	44.4	8	
Average number of physical symptoms	2.8 ± 1.8	0.3 ± 0.9	<0.001
Psychological symptoms (% cohort)			
Self-conscious	91.1	8	
Feel less attractive	65.3	4	
Negative self-esteem	59.7	2	
Negative effect on intimacy	56.5	4	
Concerns with clothing limitation	49.2	6	
Average number of psychological symptoms	3.2 ± 1.4	0.2 ± 0.9	<0.001

symptoms, and number of psychological symptoms demonstrated no significant correlations.

## DISCUSSION

The controversy surrounding labiaplasty is unique among cosmetic surgical procedures.<sup>2,28,32-38</sup> Opponents consider the procedure to be unethical and medically unnecessary, attributing its popularity to portrayals of women as sex objects. Women seeking labiaplasty are felt to be victims of cultural biases, male chauvinism, gender inequality, and media images, most notably pornography.<sup>2,3,7,8,10,19,28,32-42</sup>

In 2019, despite the high satisfaction and low complication rates associated with labiaplasty,<sup>3,5,7,25</sup> the American College of Obstetricians and Gynecologists reaffirmed their 2007 committee opinion<sup>20</sup> that cosmetic vulvovaginal surgery was “untenable” given a lack of evidence establishing the safety and efficacy of the procedures. The Royal College of Obstetricians and Gynaecologists in the United Kingdom released a similar statement.<sup>43,44</sup>

Opposition to labiaplasty likely takes root from cultural practices and influences that reach deeper than those surrounding other female-based cosmetic procedures, like

breast augmentation. Physicians themselves may be unaware of their own cultural biases as they handle labiaplasty requests, with some either refusing to perform the procedure or referring the patient elsewhere.<sup>7,10,19,21,23,27,45</sup> Gynecologists are more likely than plastic surgeons to oppose labiaplasty, and women physicians are more likely than men to oppose the procedure, independent of specialty.<sup>7,45</sup>

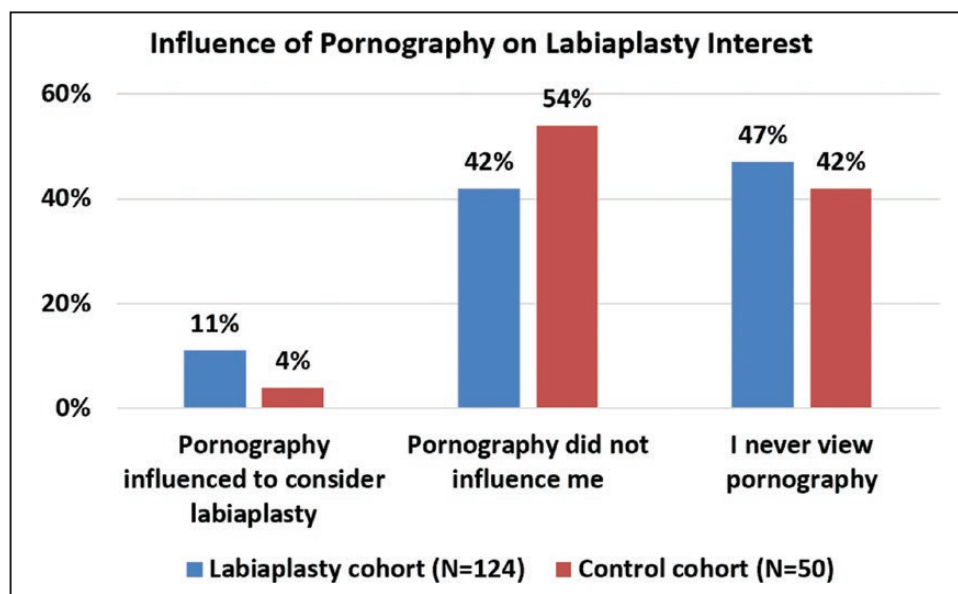
Labiaplasty opponents generally treat women wishing to reduce their labia through education about their anatomic normalcy and referral for psychotherapy.<sup>8-11,46-48</sup> An Australian study found that more than one-half of general practitioners suspected patients requesting labiaplasty had a range of psychological disturbances and recommended counseling, although 75% of the doctors admitted to knowing little about the procedure.<sup>49</sup> Other conservative measures prescribed to women requesting labiaplasty, despite the lack of supporting evidence,<sup>3-5,14</sup> include wearing looser undergarments, utilizing a different bike seat, and application of emollients for physical comfort.<sup>8-11,46-48</sup>

Given the persistent, though incorrect, insistence among the lay public and physicians who do not perform labiaplasty that the procedure is lacking in safety and effectiveness, the concern over cultural manipulation of insecure or psychologically vulnerable women is understandable, although some have gone so far as to consider labiaplasty to be a form of female genital mutilation based on the World Health Organization’s definition.<sup>41,50,51</sup> These concerns, however, are unique to the female genitalia. Labiaplasty is viewed differently than other cosmetic procedures that also have both functional and appearance-related components, such as breast reduction and abdominoplasty, neither of which is the target of vigorous opposition.

A general cultural taboo surrounding female genital anatomy begins in early childhood,<sup>52-55</sup> when young boy’s genitals are often included in toddler naming games (“here is your nose”), and the external female counterparts are usually ignored.<sup>56</sup> Teachers instruct older children about internal female anatomy but not the vulva.<sup>24</sup> Furthermore, boys and girls grow up in a culture in which phallic symbols represent strength, a brave person performs actions that “take balls,” and Sigmund Freud developed the concept of penis envy. Ignoring female genitalia in our culture and formal education perpetuates this taboo,<sup>57</sup> which may contribute to resistance to acceptance of the established high satisfaction rates and low complication rates associated with labiaplasty.<sup>3,5,7,25</sup>

Associating labiaplasty motivation with pornography perpetuates this cultural taboo. Although 82% of men and 60% of women now view pornography,<sup>58</sup> an outcry has erupted<sup>24,59,60</sup> over its association with addiction,<sup>56,61</sup> promiscuity, risky behavior, sexual violence,<sup>62-65</sup> and objectification of women.<sup>66</sup> Several authors view labiaplasty





**Figure 3.** Influence of pornography on labiaplasty interest.

patients as victims of pornography and other media depictions of women as sex objects, yet they are largely silent about similar influences regarding other cosmetic procedures.<sup>17,50</sup> Thus far, only Sharp and Oates have investigated men's motivation to undergo penile enlargement through nonsurgical means,<sup>67,68</sup> publishing the first qualitative investigation of influences on men's decisions to undergo penile augmentation, in which they found that all 6 men interviewed felt pornography had had an influence.<sup>68</sup>

Unlike small penile size, however, labia elongation can be associated with functional symptoms. Magnifying pornography's influence on women considering labiaplasty trivializes the procedure and demeans those desiring it.<sup>14</sup> The results of this study show that pornography had the least influence (11%) of all factors the survey covered. Interestingly, 4% of the cohort group was also influenced by pornography to consider labiaplasty (Figure 3). The correlation coefficients calculated demonstrated no significant correlations between pornography viewership and age, number of reported physical symptoms, and number of psychological symptoms further supports our hypothesis that motivation for labiaplasty is independent of pornography influence.

In this study, a few of the women in the control cohort indicated they, too, had symptoms and appearance-related concerns. Although these numbers are far lower than that of the labiaplasty cohort's, these findings indicate that among symptomatic patients, not all turn to labiaplasty for relief.

Despite its negative connotations, pornography may serve an important function for some women interested in labiaplasty. A woman wondering if her breasts are

abnormal can easily find media images and, in settings like a dressing room or a nude beach, be able to view other women's breasts. On the other hand, a woman wondering if her labia are abnormal has few options to educate herself aside from surgeons' online clinical photos and pornography. Furthermore, she may be too embarrassed to ask her doctor, particularly if she has been previously shamed by another physician or prescribed psychotherapy.<sup>2,20</sup> Pornography is accessible, anonymous, and nonjudgmental.

The increase in labiaplasty rates in the face of persistent opposition from the American College of Obstetricians and Gynecologists and others, despite documented positive outcomes, indicates a divergence between patient experience and physician opinion. Such a divergence was under-appreciated until physician- and patient-reported outcomes of plastic surgical interventions were initially studied.<sup>69-71</sup> The better we understand women's true primary motivations for seeking labiaplasty and the impact that the outcome has on their quality of life, the better its distinction from female genital mutilation can be established and the more widely the procedure will be accepted.

## Limitations

This study was limited by the participation of patients from only 1 plastic surgery practice, the limited number of questions contained in an unvalidated survey, and yes/no questions without a Likert scale. Specifically, no sexual function questions were asked, and no specific questions probed ways in which pornography might have influenced patients. It is possible that pornographic images may

have corroborated an already established decision to proceed with labiaplasty, but they might also have spawned an interest through a digitally manipulated, idealized, or unrealistic image. Furthermore, although the survey was performed in private and the patients were told their responses would be stored anonymously, taking the survey in the surgeons' office may have intimidated some from admitting to viewing pornography among both cohorts or having been influenced by porn to have surgery among the labiaplasty cohort. Nonetheless, the response rates of both cohorts were similar, and they mirror viewing rates of the general population and the pornography influence rates of previous labiaplasty patient studies<sup>15,50</sup> and thus appear to be less likely to be the result of inherent bias.

Despite its limitations, this study represents the largest study to date investigating the relative influence on pornography compared with other motivating factors on women's labiaplasty interest.

## CONCLUSION

Pornography influences some women to seek labiaplasty, but relative to other motivating factors its role is minor. Recognizing that symptoms like pain, tugging, heightened self-consciousness, lowered self-esteem, and a negative impact on intimacy play a far greater role in a woman's decision to have a labiaplasty than does pornography may help destigmatize the procedure.

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