Vulvectomy

What is a vulvectomy?
A vulvectomy is surgery to remove part of the vulva. The vulva is the fatty folds around the openings to your vagina and bladder.

There are different types of surgery for the vulva:

Simple vulvectomy or wide local excision of the vulva:
This surgery removes the tumour on the vulva and some normal skin around it.

Radical vulvectomy:
This surgery removes the tumour on the vulva and a larger area of skin and deeper tissue.
You may also have a groin node dissection during your vulvectomy. In a groin node dissection, some of the lymph nodes in your groin may be taken out. Lymph nodes are pea-sized glands that fight infection. If lymph nodes in your groin area are taken out, they will be checked, as cancer can spread to them. Your lymph nodes may be taken out of one or both sides. If this is done, you will probably have a small tube or drain at your groin incision (cut).

Before surgery
• Blood samples will be taken.
• Do not eat or drink after midnight.
After surgery

After surgery you will have:

• An incision on your vulva and possibly in your groin.
• An intravenous (IV) to give you fluids.
• A catheter (tube) may be in your bladder to drain pee.

Breathing

You will be asked to take deep breaths and to cough every 1-2 hours. You will get an incentive spirometer to help you do this. This is to help prevent lung problems such as pneumonia.

Pain

At first, you may have some pain around your incisions. You will get medicine to help with the pain. Please tell your nurse when you are starting to feel sore rather than waiting until the pain is really bad. Pain medicine can be given every 3-4 hours when needed.
Activity
Usually the nurse will help you get out of bed and walk around the day after your surgery. Depending on the extent of the surgery, you may be asked to stay in bed for the first day.

Food
You can eat and drink soon after surgery. When you are drinking well, your IV will be taken out.

Blood clots
In the hospital you will get an injection of a blood-thinning medicine called Fragmin®. This injection, plus moving your feet and legs every hour, will help to prevent blood clots from forming.
If your lymph nodes were taken out, you may need to keep taking Fragmin® at home.

What are your questions?
Please ask. We are here to help you.
Swelling in your legs

If your lymph nodes were taken out during surgery, your legs may swell. Lymph nodes control how fluids move in your body. To lower swelling, raise your legs for several hours each day. Try putting your legs up on two pillows when you are sitting.

You may also need to wear special support stockings. You may be asked to wear these stockings for a few months after your surgery.

Your incision

It is important to keep your vulvar area as clean and dry as possible.

After surgery, the nurses will clean your incision regularly.

The nurses will show you how to rinse yourself with a ‘peri-wash’ spray bottle. Use the spray bottle after you pee until your incisions are healed.

Your nurse will also show you how to have a sitz bath. You will have a sitz baths 3 times each day until your incision is healed. Carefully pat the area dry (do not rub) after each sitz bath.
At home

• Your vulvar area may be numb or tender. The skin taken out during surgery was like padding to that area. Try sitting on pillows or something soft.

• Some women find that their pee ‘sprays’ when they go to the bathroom, getting their thighs wet. This happens because the outer folds of skin around the opening to your bladder have been taken out. You may need to change your position on the toilet seat.

• Keep your vulvar area as dry as possible. After using the bathroom, rinse the area, and then carefully pat dry.

• Wear loose clothing and cotton underwear.

• Avoid wearing pantyhose, tights or shape wear.

• Do not use powder or scented soaps on your vulvar area.

Please read the pamphlet, *At Home After Gynecological Surgery*. 
Sex

You can start to have sex again 6-8 weeks after your surgery, as long as your incision has healed completely.

You and your partner should start slowly and gently. Water-based lubricants may be helpful if sex is uncomfortable. Some women feel that their vulvar area feels numb after this surgery. Feeling may come back over several months but some women may find that this numbness never goes away.

You may want to try other positions during sex, such as side-lying or female-on-top, if you find your usual positions are uncomfortable. Placing a pillow under your bum may make sex more comfortable for you.

The clitoris is the sensitive tissue found above the opening to the bladder. Women usually feel pleasure when it is touched. If your clitoris was taken out, you will have less feeling in that area.

Other sensitive areas include breasts, thighs, earlobes and the back of the neck. Keep an open mind. Touching, cuddling and stroking can give you great pleasure.
Each woman reacts in a different way to this surgery. You may feel worried about its effects on you and your partner. This is normal. Give yourself time to adjust physically and emotionally. Most women feel confident and comfortable in getting back to their normal routines and activities within a few months after surgery.

Call your doctor or go to the Emergency Department if you have:

› Fever (temperature of 38.5 °C or 101.3 °F or higher)
› More redness, swelling, or warmth around your incision
› More pain or tenderness around your incision
› Separation of the edges of the incision
› Drainage from your incision
› Vaginal discharge that is heavier than a normal period or has a bad smell
› Chest pain, shortness of breath, or pain, redness and swelling of one leg, as these can be signs of a blood clot
This pamphlet is just a guide. Please talk to your health care provider about your questions. We are here to help you.
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The information in this pamphlet is to be updated every 3 years or as needed.