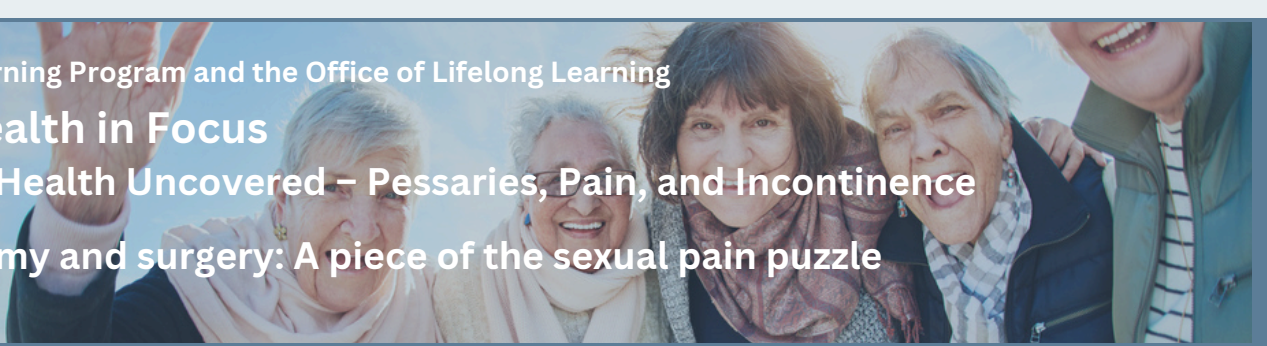


Women's Health in Focus

Part 1- Pelvic Health Uncovered – Pessaries, Pain, and Incontinence

Clitoral anatomy and surgery: A piece of the sexual pain puzzle

Dr. May Sanaee

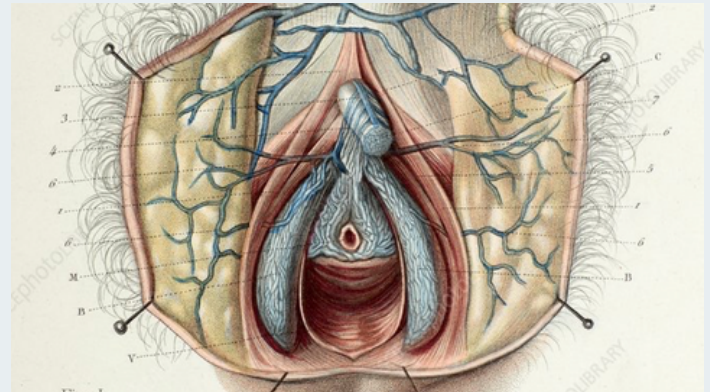


Take Away #1

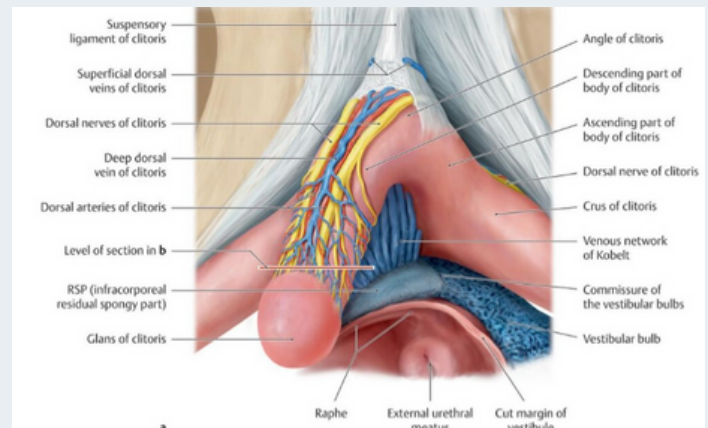
- The clitoris has been intentionally excluded from medical teaching for over 100 years
- This has implications for health care providers' knowledge and comfort with external female genitalia
- This has resulted in the clitoris as an 'orphan' structure

Reasons to learn the anatomy

- Bicycle injury
- General sexual education of patients
- Complex obstetrical tears
- Female Genital Mutilation/Cutting
- Gender affirming surgery
- Requests for labiaplasty/clitoral hood reduction
- Urogynecology surgeries (retropubic slings, martius flap, anterior/paravaginal repairs, etc)
- Vulvar dermatoses, biopsies
- Vulvar cancers
- Clitorodinia, pelvic pain



Constantin Bonamy and Paul Broca 1866



Moore's Clinically Oriented Anatomy, 2023

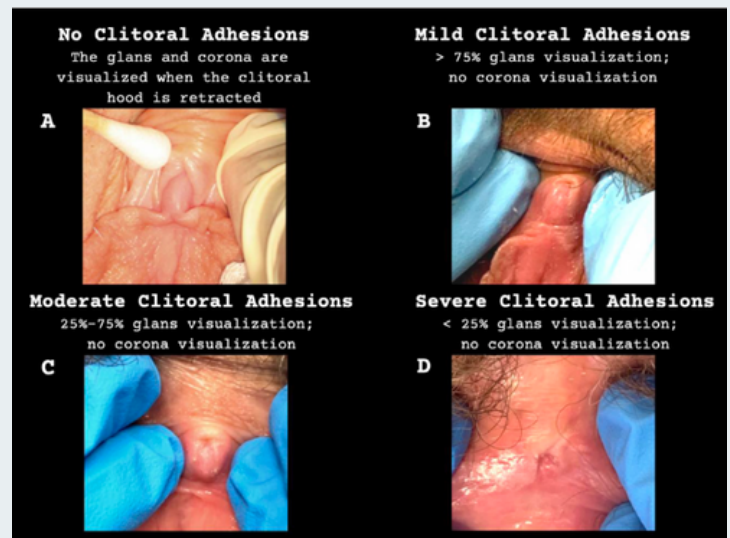
Take Away #2

- The clitoris is a 9cm complex with erectile, nervous and vascular structures
- The relationship between the clitoris and its surrounding structures is not yet fully elucidated
- The relationship between the clitoris and our surgical techniques is not yet fully elucidated

Proposed associations with clitoral adhesions

POTENTIAL CAUSES	POTENTIAL EFFECTS/SYMPTOMS
Recurrent yeast infections Recurrent UTI Smegma/inflammation/copious discharge Lichen Sclerosus/Lichen Planus	Asymptomatic Foreign body sensation Hypersensitivity Clitorodinia Sexual pain Persistent genital arousal disorder
Blunt/sharp genital trauma Female genital cutting, Genital cosmetic surgery	Balanitis
Low calculated free testosterone Oral contraceptive use	Hyposensitivity Secondary anorgasmia, loss of sensation

Clitoral Adhesions

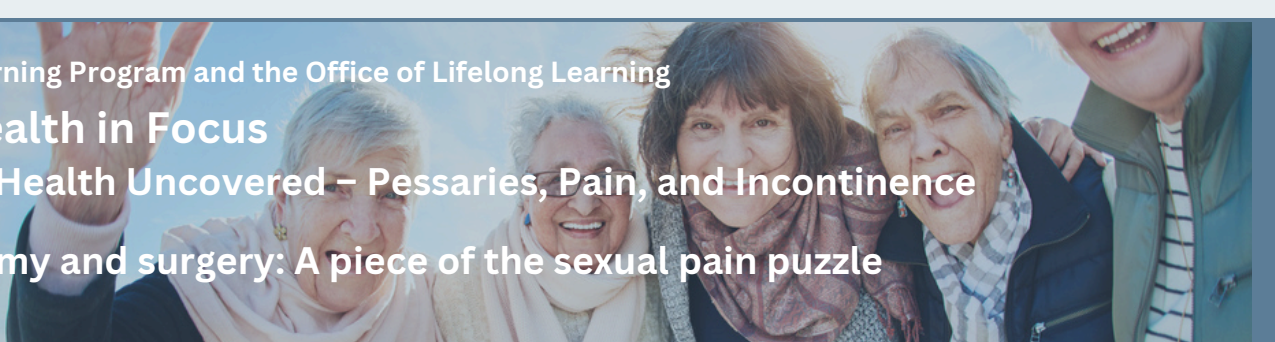


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Treatment

- Non-surgical lysis of clitoral adhesions



Take Away #4

- Include a vulvar and clitoral examination in all patients, especially with low libido, clitoral/vulvar pain, 'urethral' pain, secondary anorgasmia
- Score the percentage adhesions you see as mild (<25%), moderate (25-75%), severe (>75%)

Practical Tips for Clitoral Adhesion release

- Document percentage fused before/after
- Treat lichen sclerosus aggressively prior to release
- Office or Operating Room
- Use topical anesthetic +/- dorsal clitoral nerve block
- Sterile qtips and hemostats
- "Non-surgical" release

Clitoral Health Studies

- Patient and Provider Surveys
- Clinical Trial Outcome Data
- Refer patients to Dr Sanaee at the Urogynecology Clinic at the Lois Hole Hospital for Women (edmontonurogynecology.com)
- [Canadian Society for Pelvic Medicine](http://CanadianSocietyforPelvicMedicine.org)

Take Away #3

- Smegmatic pseudocysts and keratin pearls are sebaceous debris that become trapped under the clitoral hood
- RETRACT, RETRACT, RETRACT!
- At a young age boys are taught to clean and retract the penile foreskin, but this is not taught to young girls

Sexual Medicine Reviews, 2023, 11, 196–201
<https://doi.org/10.1093/sxmrev/qead004>
Advance access publication date 27 March 2023
Review



Clitoral adhesions: a review of the literature

Jennifer P. Romanello, BS¹, Monica C. Myers, BS², Elsa Nico, BS³, Rachel S. Rubin, MD^{4*}

Pharmacologic Treatment: local estrogen/testosterone, steroids, antifungals, antibiotics petroleum jelly, hyaluronic acid, DHEA, [prasterone](#)

Procedural therapy: manual/physical therapy, retraction, non-surgical lysis, surgical lysis (dorsal slit procedures), carbon dioxide laser

<https://doi.org/10.1093/sxmrev/qead004>

Narrative Review

O&G OPEN

Approach to Diagnosis and Management of Clitorodysplasia

Jill Krampf, MD, MEA, and Rachel Pope, MD, MPH

<https://pmc.ncbi.nlm.nih.gov/articles/PMC12456546/pdf/og9-2-e062.pdf>

Take Away #5

- Contribute to literature with high quality studies (join me!)
- Clitoral anatomy curriculum in medical school and residency
- Improve your 'cliteracy' and that of your colleagues, family and patients



Consider using [MyL3Plan](#), a free online tool developed by the Office of Lifelong Learning (L3) that can be used to meet and support the 3 activities/action plans required by the PPIP-CPSA and earn up to 36 Mainpro+ certified credits.

[Learn more here!](#)