Sexual Enhancement Surgery

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Reveal your inner beauty
About your surgery
Sexual Enhancement

Sexual enhancement surgery involves procedures which directly or indirectly affect the sexual functioning of the person desiring them. The male enhancement surgery involves elongating the male penis and making it larger in circumference. The female counterpart to this is vaginal tightening procedures and effacement procedures. Often, additional procedures such as liposuction of the mons pubis (area above the genitalia which is hair-bearing) or laser hair removal procedures are also desired. For more information on these adjunctive procedures, please see the appropriate brochures.

Male genital enhancement for elongation of the penis is termed phalloplasty. Penile shaft enhancement is a relatively simple, safe operation performed on an outpatient basis. There are two separate components to the enhancement procedure: lengthening and circumference increase. The lengthening procedure actually creates no additional penile length but, rather, advances the internal portion of the penis to expose greater length. The penis is held against the pubic bone by a suspensory ligament. The 3 to 4 inches of penis that is inside the body is called the root. This root arches upwards and, by resecting a portion of the suspensory ligament, this upward arch is extended forward. This ligament is partially cut in order to allow the penis to hang lower, away from the body. The cutting procedure is now performed bloodlessly and exactly by the use of a laser. Anatomical differences between individuals make the increase in length variable between individuals but, often, an increase in apparent length of from ½ to 2 inches can be obtained. A portion of the ligament is then reconstructed so that there is no change in the angle of the erect penis. For men with significant fatty tissue in the pubic area, removal of some fat in the pubic area will also add to the perceived length increase of the penis. There are a small percentage of men (3-4%) who get no length gain at all in the erect state and, rarely, may even lose a bit of length due to scar tissue formation and retraction. Many men will require weights or traction on the penis in order to obtain the maximum benefit from the lengthening procedure. There is very little change in the erect length of the penis with this procedure.
Enhancement of penile circumference is performed with the patient's own fatty tissue. Although the take is less predictable for fat transfer than with the use of some other soft tissue augmentation materials, fat is the safest substance to use in this area. Due to the erectile function of the penis, an extensible material that has a very low scaring potential must be used. If scaring occurs from the procedure, the curvature of the erect penis is altered and this, of course, must be kept to a minimal risk. There is also no risk of allergic reaction or rejection with the use of the patient's own tissue. The penile shaft is narrower than the maximum circumference of the head and, therefore, the shaft can be increased in circumference by as much as 50% or more depending upon the anatomy of the patient. The shaft is usually increased in size slightly more than that of the head. Often, a second procedure is performed about three months following the first in order to maximally increase size evenly throughout the shaft. This increase in circumference is present in both the flaccid as well as the erect state.

No foreign material or implant is used in either procedure. The procedure does not interfere with sensation or function as long as no complications are incurred. There is always a surgical risk of infection and bleeding although the incidence of both of these is negligible in Dr. Caputy's practice.

The female sexual enhancement surgeries involve a number of possible different procedures. The effacement procedure involves a lift of the entire pubic area so that the female genital area, which falls with time, is returned to a more youthful position. Many women also find that the effacement procedure allows more direct clitoral stimulation during sexual intercourse and many women who have never experienced orgasm during intercourse are capable of doing so following the procedure. What is performed is essentially a reverse tummy tuck procedure although both can be performed at the same time. An incision of variable length is made within the hair-bearing area of the pubis (much like that for a C-section) and the lower abdominal structures are elevated and secured to the higher position. Often direct fat removal or liposuction of this or adjacent areas are also performed.

Tightening of the vagina is performed in one of two manners. A small surgical procedure can be performed where a tightening suture is placed at the opening of the vagina and, if needed, at variable sites along the length of the vagina. If the entire vaginal structure is in need of tightening and a newly mucosalized (inner moist "skin-like") surface of the vagina is desired, a laser resurfacing procedure of the vagina can be performed. This tightens the entire structure evenly and also gives a complete new surface to the entire inner vagina. The resurfacing procedure takes approximately two weeks to heal and a stent (inner spacer) must be used throughout the healing time. The tightening and new folds made in the vaginal wall through the use of this procedure gives an entire new surface and even tightening to the area. Although the healing time is longer than by the older suture method, the results are more uniform, longer lasting and work over the entire vaginal surface. Particularly, women who have had multiple vaginal births will notice the greatest effect from the surgery. The risks are a very slight risk of infection and the risk of the vaginal walls healing together should the stent not be properly placed and worn continuously together with lubrication of the entire resurfaced area. Antibiotic and antiviral agents are prescribed
for use during the entire healing period to avoid both bacterial and viral infection. Some women will experience an overgrowth of yeast during the later stages of the healing period and either an oral or vaginal antifungal agent may need to be obtained. No sexual intercourse can be performed during the healing time that may take two to three weeks. The surgery should be scheduled just following the menstrual period so that irritating bleeding through the healing area can be avoided.

As with male sexual surgery, there are many adjunctive procedures which may be performed including breast augmentation or lifting, hair removal by the latest laser techniques, tummy tucks, ultrasonic-assisted liposuction, procedures to help with snoring, etc. Each of these procedures is outlined in separate brochures such as this and are readily available at AESTHETICA.

All of the procedures reviewed for both men and women are aids in the enhancement of sexuality and sexual pleasure. They are not ends in themselves and a caring, loving relationship cannot be overlooked as the epitome of sexual function. These procedures aid the self-image and self-knowledge of being able to provide sexual pleasure to one’s partner. A great deal of this is of psychological benefit in addition to the improvement in physical attributes attained by the surgery. Solely Dr. Caputy performs all surgery. Dr. Caputy has a great deal of experience and expertise with all of the above noted procedures and is a laser pioneer in the community and an international teacher of laser techniques. All surgery is performed in the comfort, safety and privacy of a fully accredited outpatient surgical setting. This means that only you and the staff of AESTHETICA know the surgery that is planned and performed. Male and female staff members are always present simultaneously when patients are sedated or anesthetized. Patients are never alone or with only one other person in the facility. All surgery is performed with the utmost confidentiality. Only board-certified anesthesiologists (MDs) are used to administer intravenous sedation or general anesthesia as dictated by the extent of the procedure being performed and patient’s wishes.