

Early outcomes of transition related vaginoplasty from the first publicly funded Transition Related Surgery Program in Canada

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Introduction

- Vaginoplasty is a common surgery for transgender and gender diverse people.
- Approximately 200 Ontarians undergo vaginoplasty every year.
- Until 2019 there was no transition related surgery program in Ontario offering vaginoplasty
- WCH opened the first fully publicly funded transition related surgery program in Canada
- There is a learning curve to complex surgery and new or small surgical programs may have higher complication rates than more established programs.
- To ensure quality care and ongoing quality improvement, it is important to analyze and publish our surgical outcomes.

Purpose

- To describe the intra-operative and post-operative outcomes from our first 30 consecutive patients undergoing transition related vaginoplasty

Methods

Ethics:

- Ethics approval was obtained from WCH (ASQIP# 2020-0127-P)

Sample:

- First 30 patients who underwent vaginoplasty at WCH's Transition Related Surgery (TRS) Program and gave consent to participate in this study.

Data Collection:

- Retrospective chart review

Analysis:

- Descriptive analyses were performed using Excel.

Mean age, years (mean, SD)	34.7	(10.9)
ASA class (N, %)		
1	15	(56%)
2	12	(46%)
3	0	(0%)
4	0	(0%)
Mean BMI, kg/m ² (SD)	25.4	(5.2)
Mean follow-up time, months (SD)	13.2	(5.4)

Mean EBL, ml (SD)	184.3	(116.1)
Mean case time, min (SD)	295.3	(49.5)
Mean in-room time, min (SD)	352.6	(53.0)
Intra-op cysto (n, %)	1	(4%)
Drain placed (n, %)	24	(89%)
Intra-op complication (n, %)	1	(4%)
Transfusion (N, %)	0	(0%)

	N	%
Complication in first 30 days		
Clavien-Dindo Grade 1	1	(4%)
Clavien-Dindo Grade 2	2	(7%)
Clavien-Dindo Grade 3	2	(7%)
Clavien-Dindo Grade 4	0	(0%)
Clavien-Dindo Grade 5	0	(0%)
Requiring narcotics at POD 14	5	(19%)
Wound dehiscence	16	(59%)
Hypergranulation	14	(52%)
Mental health crisis	6	(22%)
Satisfied with appearance	19	(70%)
Able to orgasm	21	(78%)
Urine going into toilet	26	(96%)
Need for any revision	5	(19%)

	Intra-OP		POD 7		Last F/U	
Vaginal Depth*	N	%	N	%	N	%
5	11	(41%)	3	(11%)	14	(52%)
4	0	(0%)	21	(78%)	8	(30%)
3	0	(0%)	2	(7%)	1	(4%)
2	0	(0%)	0	(0%)	1	(4%)
1	1	(4%)	0	(0%)	0	(0%)
N/A†	1	(4%)	1	(4%)	1	(4%)
Missing data	14	(52%)	0	(0%)	2	(7%)
Dilator Size‡						
4 (Orange)	13	(48%)	0	(0%)	15	(56%)
3 (Green)	1	(4%)	0	(0%)	6	(22%)
2 (Blue)	1	(4%)	24	(89%)	4	(15%)
1 (Purple)	0	(0%)	2	(7%)	1	(4%)
N/A†	1	(4%)	1	(4%)	1	(4%)
Missing data	11	(41%)	0	(0%)	0	(0%)

* Vaginal depth refers to the dot reached on the dilators (see image), with number 5 being the deepest and number 1 being the most shallow.

† One patient underwent vulvoplasty (aka zero depth vaginoplasty) and therefore does not need to dilate.

‡ Diameter of the dilators is 29mm, 32mm, 35mm, and 38mm for sizes 1-4 respectively.



Image 1: Soul Source GRS dilators, sizes 1-4.

Results

- Twenty-seven of thirty patients (90%) consented to participate.
- There was one intra-operative complication.
 - This was a rectal injury which was repaired primarily and managed with a diverting stoma.
- Post-operative outcomes are outlined in table 3.
 - Overall complication rate was 18%.
 - Over half of patients developed some wound dehiscence and/or hypergranulation tissue.
 - More than 1 in 5 patients experienced acute mental health difficulties post-operatively.
 - Most patients were satisfied with the cosmesis (70%), able to orgasm (78%), and had a urinary stream going into the toilet (96%).
- There were no occurrences of vaginal stenosis
 - At the last follow-up, most patients (56%) were dilating with the largest size and the majority (82%) were reaching the 4th or 5th dot on the dilator.

Conclusions

- Our complication rate of 18% is comparable to the published literature for transition related vaginoplasty.
- These early outcomes for our patients are encouraging, with most patients being satisfied with the outcome and having a good functional outcome.
- Ongoing review is necessary to identify areas of improvement.