

After treatment

- Continue good hygiene.
- Apply A & D ointment every night until breasts start to develop at puberty. With help, she may learn to do this herself.
- Check the area every few months if she is applying the cream herself to be sure that the adhesions aren't coming back.

If symptoms return after you have been treated

- **Do not** use Premarin® cream without calling the office.
- **Do not** use Premarin® in an on-again/off-again way.
- Call the office if the adhesions recur in spite of efforts to prevent them.

Clinic locations

Children's - Minneapolis
2525 Chicago Avenue South
Minneapolis, Minnesota 55404

Children's - St. Paul
345 North Smith Avenue
St. Paul, Minnesota 55102

For directions, please visit our Web site at www.childrensmn.org.

Contact us

For more information about the Pediatric and Adolescent Gynecology Program, call (651) 220-5999 from 8 a.m. to 5 p.m., Monday through Friday.

Pediatric and adolescent gynecology team

Rachel Miller, MD
Angela Robbins, RN, CNP

For medical professionals

For referrals or assistance 24 hours a day, call Children's Physician Access at (612) 343-2121, Twin Cities Metro, or toll-free (866) 755-2121.

Labial Adhesions

Pediatric and Adolescent Gynecology Program

(651) 220-5999

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What are labial adhesions?

Labial adhesions occur when the inner lips of the female genitals (labia) temporarily grow together (adhere). This is most common in young girls age 3 months to 6 years.

What causes labial adhesions?

Usually, irritation of the skin makes the labia start to grow together. Poor genital hygiene and bacteria that are always present in the area are usually the cause. Keeping the area clean is important to treat adhesions and to prevent them from coming back.

What is the treatment?

Surgery is almost never needed. The best treatment for labial adhesions is estrogen cream (Premarin®) followed by preventive measures.

Apply the cream:

- 2 times a day
- Use a pea-sized amount
- Put the cream in the middle of the adhesion and apply slight pressure with your finger
- For 2 to 8 weeks as directed by your doctor

With this treatment, the adhesions become thin and usually separate on their own.

Sometimes it is necessary for your health care provider to separate the labia. Using the Premarin® cream at home will make

the area of adhesion very thin so that separation can then be done easily in the office using a numbing cream (topical anesthetic).

After the adhesions are gone

It is important to keep the labia from adhering again.

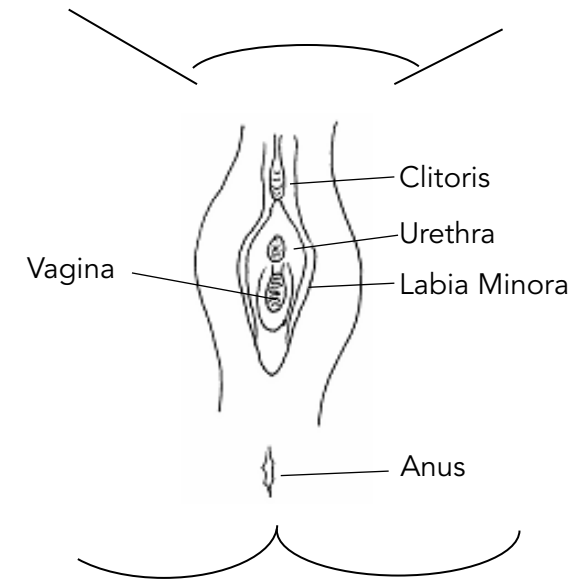
- Put a thin layer of A & D ointment on the area every night.
- Continue this treatment until puberty, when breasts start to grow.
- Without this continuing treatment, the adhesions are very likely to come back.
- Labial adhesions do not cause future gynecologic problems.

Hygiene

For good hygiene, teach young girls to:

- Wash hands before and after toileting.
- Wipe from front to back after urinating- consider using toilet paper wipes or damp gauze.
- Urinate with knees spread apart and stay seated on the toilet until finished urinating to allow all the urine to come out.
- Take a bath (not a shower) every day. Soak in a frog-leg position in a bathtub of plain water for 10 to 15 minutes daily.
- Wash the genital area very gently during a bath, use a mild bar soap such as Dove®, and make sure to wash between the folds (labia). Rinse well after a bath with clean water. No bubble baths.

Normal female genitalia



Labial adhesion

