

What Are Labial Adhesions?

By far the most common form of vaginal obstruction in little girls is fusion of the labia minora (small lips) as a result of labial adhesions. These are typically diagnosed in girls from 6 months to 6 years of age. However, they can be found in older girls. Diaper rash, infections, irritants, excessive cleaning, or mechanical trauma commonly cause chronic inflammation of the labia. Occasionally the inflammation is the result of chronic sexual abuse. Whatever the cause, as the labia tries to heal, fibrous tissue adheres the labia to each other. Some girls are prone to forming adhesions no matter how careful the parents are. The adhesions result in a smooth membrane over the vaginal opening with a thin, pale line at the center. This surface membrane usually starts forming at the rear of the opening, and ‘zippers’ closed toward the top. Usually, a sufficient opening at the top of the labia minor to permit urine and vaginal secretions to exit.

The adhesions may resolve spontaneously when girls are out of diapers or pull-ups both the day and night time. When labial adhesions persist, the estrogen surge at puberty may correct the problem. Labial adhesions can cause complications, such as infections or obstruction; therefore many physicians believe the adhesions should be treated when discovered. If treatment is needed or preferred, the natural process can be accelerated with the application of topical estrogen. A hormone cream, such as Premarin, should be applied twice daily for 2 to 8 weeks (until adhesions resolve), and then nightly for an additional week. It is important to apply the cream only to the area of the adhesions. Although the adhesions are gone, it is still necessary to use another barrier cream or ointment each night so that the labia do not become stuck together again. This is usually continued for another 6-12 months. A&D ointment is preferred. **Forced separation** should never be carried out, as it is very painful and the adhesions often re-occur.

While prolonged use of estrogen cream can cause slight breast development or other signs of puberty, these side effects are **not** common with the short time of treatment recommended above, especially if you are sure to concentrate the cream on the area of the adhesions and avoid other skin surfaces. Also, wash your hands well after applying the cream and stop it if you do notice signs of breast development, etc.

Overall, the young lady will probably be a lot more comfortable after the adhesions have resolved.