

## Labial paraffinoma in menopause women

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**Abstract.** Age-related changes in menopause women not only affect the physical appearance of the female external genitalia but also disrupt sexual functioning, for which many menopause women may require treatment to resolve these aesthetic problems or sexual dysfunction. Unfortunately, it is not infrequent that women seek non-medical solutions, including local injection of an unapproved agent into external genitalia, and it is extremely rare for it to be reported in literature. This case study reports on the experiences of treating two menopause women who had labial granuloma induced by local injection of paraffin.

**Additional keywords:** female sexual dysfunction, granuloma, labium majora, menopause, paraffin.

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### Introduction

Like other body areas, female genitalia are affected by the normal process of aging. The decrease in hyaluronic acid, collagen and fat result in volume loss, and rhytids development. These age-related changes not only affect the physical appearance of the female external genitalia, but also disrupt sexual functioning.<sup>1</sup> Therefore, many menopause women may require treatments to resolve these aesthetic problems or sexual dysfunction. However, it is extremely rare for there to be reports on labial granuloma induced by local injection of an unapproved agent in aged women, whereas there have been many reports on penile paraffinoma with its clinical manifestation and surgical outcome.<sup>2-5</sup> This case study reports on the treatment experiences of a female patient with labial paraffinoma.

### Case report

Case 1: a 56-year-old woman was presented with pain in the labia region. She reported a loss of sexual function, such as poor sexual desire and arousal, and had been driven to undergo labial augmentation with paraffin injection by a non-medical person 6 years ago before presentation. While no improvement of sexual arousal or orgasm was noticed, pain at the labia region began to develop 6 months before presentation, which was aggravated during coitus and not relieved by taking analgesics. On examination, there was a firm, slightly indurated and tender mass without erythema, ulceration, discharge or

lymphadenopathy on both sides of the labia majora. A longitudinal skin incision was made on both sides of the labia majora and paraffin-induced inflammatory tissues were totally removed, taking care to avoid injury to the important anatomical structures around the labia. The wound was primarily closed without any skin flap or graft procedure (Fig. 1). On histological analysis with hematoxylin and eosin staining, the tissue revealed chronic inflammation with granulomatous reaction, composed of variable-sized vacuoles (Fig. 2). On follow-up evaluation, 3 months after the surgery, the labia healed without complication and vulvar pain subsided greatly.

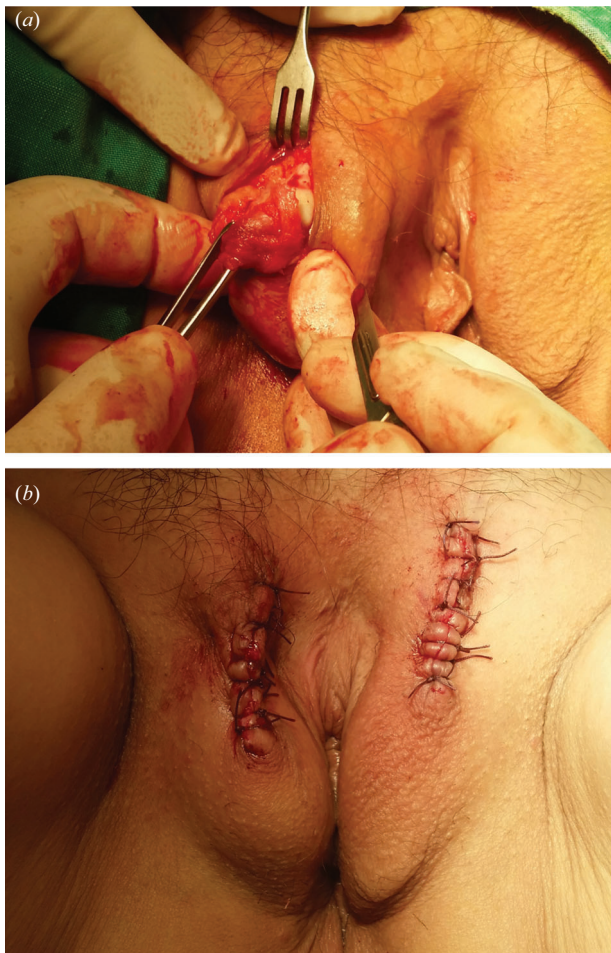
Case 2: a 55-year-old woman recently presented who experienced vulvar pain during coitus. She reported that she had undergone an illegal paraffin injection into the labia for aesthetical improvement of genitalia 4 years before presentation. Her clinical presentations, including surgical procedure, histology and treatment outcome, was very similar to those of case 1.

This study was approved by the Ethics Committee of Inha University Medical School.

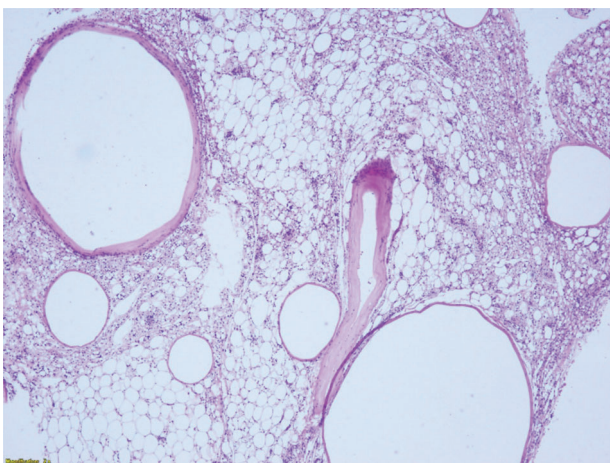
### Discussion

As the population in Korea has been rapidly increasing, the same can be said for the population growth of postmenopausal women.<sup>6,7</sup> Moreover, the prevalence of female sexual dysfunction after the age of 50 years is very high, reaching 72% of the 50 years and over age group.<sup>8</sup> Discussing sexual

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**Fig. 1.** (a, b) Removal of Vaseline-induced inflammatory tissues.



**Fig. 2.** Histological staining (H&E – 2× magnification) revealed chronic inflammation with granulomatous reaction, composed of various sized vacuoles.

matters by menopause woman with healthcare practitioners remains largely taboo in Korea, as well as in other Asian countries, therefore, sexual problems are rarely freely discussed with a doctor. Moreover, it is reported that the prevalence of hypoactive sexual desire disorder is higher in Asian than in Western women because Western women are more comfortable talking about their sexual problems with healthcare providers than Asian women are.<sup>9</sup> Inappropriately, some patients prefer to seek advice from non-medical people and have therefore experienced severe complications caused by unapproved therapies.

Our case study patients, unfortunately, were administered a local injection of an unapproved agent, paraffin, by non-medical people. It is unavoidable to excise this foreign body-induced granuloma, although it is just a time of matter before complications develop. It is desirable to surgically remove the granuloma as early as possible because milder complications make the surgical procedure easier and there are better outcomes for the patient, as described in our cases. In the field of sexual medicine, the demand for better sexual function and aesthetical improvement of external genitalia in aged women is increasing. First, illegal injections of unapproved substances should be avoided; instead, women should be provided with the appropriate treatment, including medical treatment of sexual dysfunction or the use of modern genital aesthetic procedures. The latter includes fat or dermal grafting, hyaluronic acid injection or a variety of labiaplasty procedures, although there is no standardised approach for labia majora augmentation and controversies still exist regarding this subject. Thus, these treatments likely increase the role of primary physicians who primarily treat these aged women in the fields of sexual medicine, gynaecology, urology, plastic surgery or gerontology.

### Conflicts of interest

The authors have no potential conflicts of interest to disclose.

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