Labial adhesions

Labial adhesions
Summary

- The cause of labial adhesions is thought to be irritation to the labia minora: for example, poor hygiene, strongly perfumed soaps and inflammatory conditions like vulvitis.
- The condition resolves during puberty because the effect of the female hormone oestrogen changes the cells that line the genitals.
- Treatment includes the daily application of oestrogen cream to the affected area.

The external female genitals include the labia majora (larger outer lips) and the labia minora (smaller inner lips). Generally, the two labia minora lie on either side of the vagina and urethra and only intersect at the clitoris. Labial adhesions means that the labia minora have stuck together.

This common condition affects up to two per cent of girls aged three months to six years. It is most common in those aged one to two years. It is thought to be caused by irritation to the delicate membranes of the external genitals. In most cases, labial adhesions resolve by themselves during the onset of puberty without the need for medical treatment.

Occasionally, the labia may stick along their entire length and interfere with the child’s ability to empty her bladder properly. Medical treatment is then needed. Labial adhesions don’t affect the child’s future fertility, sexual function or menstrual cycle. The condition is also known as fused labia.

Symptoms

The symptoms of labial adhesions can include:
- The inner lips are joined together.
- The condition is usually painless.
- There may be some vulval soreness in some cases.
- Dribbling urine after going to the toilet may be a problem.
- There may be some vulval soreness after urinating in some cases.
- In severe cases, there may be an inability to pass urine.

A range of causes

The exact cause is unknown, but it is strongly suspected that labial adhesions are caused by irritation to the external genitals. The range of possible irritants include:
- Faeces
- Urine
- Strongly perfumed soaps
- Bubble baths
- Inflammatory conditions such as vulvitis
- Atopic dermatitis
- Pinworms
- Labial injuries
- Sexual abuse.

The labia fuse together

The outer skin surface (squamous epithelial layer) of the labia minora is thin and delicate. Irritation and inflammation can cause the outer skin to become exposed and raw. The two raw lips then heal together in much the same way as any skin cut might heal. Usually, the labia start to fuse at the bottom end (posterior fourchette), closest to the anus, and work up towards the clitoris.

Labial adhesions are more common during the nappy years. Poor hygiene is thought to be a common cause in older girls. Low oestrogen levels (hypo-oestrogenism) are also thought to contribute to the development of labial adhesions. The condition resolves during puberty because the effect of the female hormone oestrogen changes the cells that line the genitals.

Possible complications
Some of the possible complications of labial adhesions include:

- **Urination problems** - such as changes to the direction of the urine stream (for example, the urine may squirt sideways instead of straight down) and dribbling urine after going to the toilet (because a small amount of urine collects within the fused labia).
- **Urinary tract infections** - about 20 per cent of girls with labial adhesions develop asymptomatic bacteriuria (bacteria in the urine without symptoms of infection) and up to 40 per cent experience urinary tract infections.
- **Hydronephrosis** - if the labial adhesions block the urethra, the child is unable to empty their bladder. Without treatment, this will lead to an abnormally enlarged kidney (hydronephrosis) caused by the build-up of urine.

**Diagnosis methods**

Labial adhesions are diagnosed by physical examination. The doctor may check to make sure that other genital abnormalities, such as an imperforate (closed) hymen, aren’t causing the difficulties. Additional tests may include:

- Urine tests to check for infection
- Voiding cystourethrogram to check for enlarged bladder and kidneys.

**Treatment options**

In most cases, labial adhesions are harmless and resolve by themselves once puberty starts (from about 10 years of age). If the adhesions are severe and interfere with urination, medical treatment is needed. Options include:

- **Monitoring** - in mild cases, no action is necessary.
- **Oestrogen cream** - generally, the cream is applied to the area once or twice every day for between two and eight weeks. This is successful in about 80 per cent of cases. Any hormonal side effects are short lived and resolve by themselves once the cream is no longer used. For example, colour changes to the labia are common, but the skin tone soon returns to normal after the end of treatment.
- **Operation** - sometimes, the labia are separated by surgery. This option is considered the last resort. An antibiotic cream must be applied to the labial edges to stop them from sticking together while they heal.

**Labial adhesions can recur**

Successful treatment doesn’t prevent the condition from happening again. Suggestions include:

- Talk to your doctor about long term care; for example, you may need to keep applying creams (such as Vaseline) to the separated labia to prevent the condition from recuring.
- If your child is still wearing nappies, change them more frequently.
- After urinating or passing a bowel motion, your child’s genitals should be wiped from front to back to make sure that wastes don’t come in contact with the genital area. Make sure your older child knows how to wipe herself properly after going to the toilet.
- Avoid strongly perfumed soaps or bubble baths.
- Wash the genitals daily and pat dry with a soft towel.
- Seek prompt medical treatment for any vulval irritation or inflammation.
- Remember that labial adhesions sometimes recur even when you’ve done everything possible to prevent them.

**Where to get help**

- Your doctor
- Paediatric gynaecologist
- The Maternal and Child Health Line is available 24 hours a day Tel. 132 229.

**Things to remember**

- The cause of labial adhesions is thought to be irritation to the labia minora: for example, poor hygiene, strongly perfumed soaps and inflammatory conditions like vulvitis.
- The condition resolves during puberty because the effect of the female hormone oestrogen changes the cells that line the genitals.
- Treatment includes the daily application of oestrogen cream to the affected area.

**References**

- Brayden, Dr R. (2004), Labial adhesions [online], Paediatric Advisor, University of Michigan Health System, McKesson Health Solutions LLC, USA. More information here.
- Labial adhesions: fact sheet [online], University College London Hospitals, UK. More information here.

**Send us your feedback**

- Rate this website
- Your comments
- Questions
- Your details

1/4 How would you rate this website?
Send us your feedback

- Rate this website
- Your comments
- Questions
- Your details

Please note that we cannot answer personal medical queries. If you are looking for health or medical advice we recommend that you:

- talk to your doctor or pharmacist
- dial triple zero (000) in an emergency
- ring NURSE-ON-CALL Tel. 1300 60 60 24.

2/4 Your Comments

Tell us who you are
Select an option
Enter your comments below (optional)

Send us your feedback

- Rate this website
- Your comments
- Questions
- Your details

3/4 Questions

What are you here to do? Looking for information on

Did you find what you were looking for?

- Yes
- No

Send us your feedback

- Rate this website
- Your comments
- Questions
- Your details

4/4 Your details

Postcode
Email Address

Send us your feedback

Thank you. Your feedback has been successfully sent.

More information

Reproductive system - female

The following content is displayed as Tabs. Once you have activated a link navigate to the end of the list to view its associated content. The activated link is defined as Active Tab
Female reproductive system explained

- Androgen deficiency in women
  Androgen deficiency in women and its treatment is controversial, and more research is needed.

- DES daughters
  If your mother took DES while she was pregnant with you, then you are a DES daughter or DES son.

- Health checks for women
  A woman at high risk of a particular disease should be checked more frequently and/or at an earlier age.

- Pelvic floor
  Pelvic floor exercises are designed to improve muscle tone and prevent the need for corrective surgery.

- Pregnancy stages and changes
  It’s helpful to have an idea of how your body may react to the different stages of pregnancy. It also helps to know how pregnancy may affect your emotions and feelings.

- Puberty
  Adjusting to the many changes that happen around puberty can be difficult for both parents and young people.

- Reproductive system
  New life begins when a male sex cell (sperm) fertilises a female egg (ovum) within the female reproductive system.

- Sexually transmitted infections (STIs)
  It is not difficult to avoid catching sexually transmitted infections (STIs).

- Transvaginal mesh
  Transvaginal mesh has been used for more than 20 years to manage problems for women such as prolapse and incontinence. While this treatment is successful for many women, some unfortunately have...

Menstruation and ovulation

- Menstrual cycle
  The menstrual cycle is complex and is controlled by many different glands and the hormones that these glands produce.

- Menstruation - abnormal bleeding
  Heavy or abnormal periods may be an indication of other health problems.

- Menstruation – amenorrhoea
  Some women are more at risk of amenorrhoea (the absence of periods) because of emotional stress or changes in weight.

- Menstruation - athletic amenorrhoea
  Women who are athletes or who exercise a lot on a regular basis are at risk of developing athletic amenorrhoea, which is the absence of periods.

- Menstruation - pain (dysmenorrhoea)
  Women of any age can experience painful periods and some women find periods are no longer painful after pregnancy and childbirth.

- Ovulation
  The female body shows several signs of ovulation and you may experience some or all of these signs.

- Ovulation pain
  Ovulation pain is usually harmless, but can sometimes indicate various medical conditions such as endometriosis.
- Premenstrual syndrome (PMS)
  Most menstruating women have some form of premenstrual syndrome (PMS).

- Toxic shock syndrome (TSS)
  If you think you could have toxic shock syndrome, stop using tampons immediately and go to the emergency department of your nearest hospital.

Menopause

- Hormone replacement therapy (HRT) and menopause
  Hormone replacement therapy (HRT) can reduce menopausal symptoms, but the benefits and risks need to be considered carefully.

- Menopause
  Menopause is a natural occurrence and marks the end of a woman's reproductive years.

- Menopause and complementary therapies
  The use of complementary therapies to manage menopausal symptoms is popular, but the sources of information available to consumers are of variable quality and reliability.

- Menopause and osteoporosis
  Regular weight-bearing exercise and maintaining a diet rich in calcium from childhood will help reduce bone loss at menopause.

- Menopause and sexual issues
  Menopause, the final menstrual period, is a natural event that marks the end of a woman's reproductive years.

- Menopause and weight gain
  Weight gain at menopause can be managed using healthy eating and exercise; HRT may also be beneficial.

- Premature and early menopause
  The symptoms of premature or early menopause are the same as for menopause at any age.

Fertility, pregnancy and childbirth

- Abortion
  All women should have access to accurate information about abortion so they can make their own informed decisions.

- About pregnancy and birth services in Victoria (video)
  Victoria's pregnancy, birth and maternity services, help from planning a pregnancy through to giving birth and caring for a newborn.

- Age and fertility
  Age affects the fertility of both men and women, and is the single biggest factor affecting a woman's chance to conceive and have a healthy baby.

- Assisted reproductive technology – IVF and ICSI
  IVF (in-vitro-fertilization) and ICSI (intracytoplasmic sperm injection) are assisted reproductive treatment (ART) procedures in which fertilisation of an egg occurs outside the body.

- Contraception after an abortion
  Whether you have a surgical or medical abortion you can become fertile again very soon after the abortion, so it's important to start using contraception immediately if you wish to prevent any.

- Contraception - choices
  The method of contraception you choose will depend on your general health, lifestyle and relationships.

- Ectopic pregnancy
  Ectopic pregnancy is caused by a fertilised egg not being able to move through the fallopian tube.

- Endometriosis - know the facts (video)
  Learn some facts about endometriosis. We debunk some myths and explore symptoms, diagnosis and treatment options for women.

- Infertility in women
  The odds of a young fertile couple conceiving by having sexual intercourse around the time of ovulation are approximately one in five every month.

- Miscarriage
A range of feelings is normal after a miscarriage, and they often linger for some time.

- **Molar pregnancy**
  Most molar pregnancies are diagnosed when bleeding early in pregnancy prompts an ultrasound scan.

- **Placental abruption**
  Placental abruption means the placenta has detached from the wall of the uterus, starving the baby of oxygen and nutrients.

- **Placenta previa**
  Placenta previa means the placenta has implanted at the bottom of the uterus, over the cervix or close by.

- **Pregnancy - obstetric emergencies**
  An obstetric emergency may arise when a woman is pregnant, or during her delivery. In this case, extra care is needed. A woman may need a lot of tests and treatments, and extended hospital stays.

- **Pregnancy - pre-eclampsia**
  There is no evidence that pre-eclampsia is caused by emotional stress, working too hard or not getting enough rest.

- **Pregnancy stages and changes**
  It’s helpful to have an idea of how your body may react to the different stages of pregnancy. It also helps to know how pregnancy may affect your emotions and feelings.

- **Pregnancy testing**
  Sometimes, a home pregnancy test may be positive when a woman isn’t pregnant.

- **Twins - identical and fraternal**
  Multiple births are more common due to the advancing average age of mothers and the rise in assisted reproductive techniques.

- **Weight, fertility and pregnancy health**
  Compared with women in the healthy weight range, women who are carrying extra weight are less likely to conceive.

**Breast**

- **Breast awareness**
  Women should become familiar with the normal look, feel and shape of their breasts, so they will notice any abnormal changes.

- **Breast cancer**
  Breast cancer is the most common cancer in Australian women.

- **Breast cancer and oestrogen**
  There are different types of breast cancer, and around 70 per cent are sensitive to the female sex hormone oestrogen.

- **Breast conditions other than breast cancer**
  The vast majority of breast changes are not breast cancer, but you should always see your doctor if you notice changes in your breasts.

- **Breastfeeding**
  Breastfeeding positioning and attachment come naturally to some babies and mothers, but many need time and practice to get it right.

- **Breast implants and mammograms**
  Most women who have breast implants will be able to have regular screening mammograms.

- **Breast implants and your health**
  Complications can occur with all types of breast implants, but recent improvements have made breast implants safer.

- **Breast implants (augmentation)**
  Breast implants are inserted under the skin to create larger breasts.

- **Breast reduction for women**
  Breast reduction surgery removes excess breast fat, glandular tissue and skin to achieve a breast size in proportion with your body.

**Fallopian tubes and ovaries**

- **Ectopic pregnancy**
Ectopic pregnancy is caused by a fertilised egg not being able to move through the fallopian tube.

- **Endometriosis - know the facts (video)**
  Learn some facts about endometriosis. We debunk some myths and explore symptoms, diagnosis and treatment options for women.

- **Fallopian tube cancer**
  Fallopian tube cancer is one of the rarest gynaecological cancers.

- **Ovarian cancer**
  Many women with early stage ovarian cancer may not have any symptoms.

- **Polycystic ovarian syndrome (PCOS)**
  Polycystic ovarian syndrome is a hormonal condition associated with irregular menstrual cycles, excess hair growth, acne, reduced fertility, and increased risk of diabetes and mood changes.

- **Pregnancy - obstetric emergencies**
  An obstetric emergency may arise when a woman is pregnant, or during her delivery. In this case, extra care is needed. A woman may need a lot of tests and treatments, and extended hospital stays. She...

- **Pregnancy stages and changes**
  It’s helpful to have an idea of how your body may react to the different stages of pregnancy. It also helps to know how pregnancy may affect your emotions and feelings.

- **Salpingitis**
  Salpingitis is one of the most common causes of female infertility and may permanently damage the fallopian tubes.

**Uterus and cervix**

- **Cervical cancer**
  All women aged between 25 and 74 are advised to have Cervical Screening Tests every 5 years, new tests help identify HPV or cervical cancer.

- **Cervical screening tests**
  The cervical screening test protects up to 30 per cent more women than the Pap test.

- **Contraception - vaginal ring**
  The vaginal ring works in a similar way to the oral contraceptive pill to prevent pregnancy.

- **Endometriosis - know the facts (video)**
  Learn some facts about endometriosis. We debunk some myths and explore symptoms, diagnosis and treatment options for women.

- **Fibroids**
  Often, fibroids do not cause any problems, but they are occasionally associated with infertility, miscarriage and premature labour.

- **Prolapsed uterus**
  The pelvic floor and associated supporting ligaments can be weakened or damaged in many ways, causing uterine prolapse.

- **Retroverted uterus**
  Painful sex may be caused by a retroverted uterus.

- **Uterine cancer**
  Uterine cancer is one of the most common gynaecological cancers.

- **Uterine inversion**
  Uterine inversion means the placenta fails to detach from the uterine wall, and pulls the uterus inside-out as it exits.

**Pelvis, vagina and vulva**

- **Bacterial vaginosis**
  Bacterial vaginosis (BV) is caused by an imbalance of the bacteria normally present in the vagina.

- **Bladder prolapse**
  Bladder prolapse is when the bladder bulges into the vagina.
Cosmetic genital surgery - labiaplasty and phalloplasty
Cosmetic genital surgery involves reshaping the labia, vulva or penis to alter their size or shape.

Cysts
Cysts may be as small as a blister or large enough to hold litres of fluid.

Female genital cutting or circumcision (FGC)
Female genital cutting or circumcision (FGC) involves the cutting or altering of the external female genital organs.

Labial adhesions
Labial adhesions are more common during the nappy years, but poor hygiene may be a cause in older girls.

Pelvic inflammatory disease (PID)
Pelvic inflammatory disease (PID) occurs when an infection spreads from the vagina to the cervix and fallopian tubes.

Rectocele
A rectocele is when the rectum protrudes into the vagina.

Vaginal bleeding - irregular
If you suffer from ongoing vaginal bleeding problems, see your doctor.

Vaginal cancer
Some vaginal cancers have no symptoms in their early stages, and only cause symptoms once they have invaded other parts of the body.

Reproductive and contraception

Assisted reproductive technology – IVF and ICSI
IVF (in-vitro-fertilization) and ICSI (intracytoplasmic sperm injection) are assisted reproductive treatment (ART) procedures in which fertilisation of an egg occurs outside the body.

Caesarean section
A caesarean section is usually performed when it is safer for the mother or the baby than a vaginal birth.

Contraception - tubal ligation
Sterilisation is a permanent method of contraception that a woman can choose if she is sure that she does not want children in the future.

Dilatation and curettage (D&C)
A dilatation and curettage (D&C) is an operation performed on women to lightly scrape away the womb lining.

Endometriosis - know the facts (video)
Learn some facts about endometriosis. We debunk some myths and explore symptoms, diagnosis and treatment options for women.

Hysterectomy
The conditions that prompt a hysterectomy can often be treated by other means, and hysterectomy should only be a last resort.

Related Information

Vulvar conditions
Vulvar conditions include skin complaints, infections, chronic pain and cancerous conditions.

Female genital cutting or circumcision (FGC)
Female genital cutting or circumcision (FGC) involves the cutting or altering of the external female genital organs.

Cysts
Cysts may be as small as a blister or large enough to hold litres of fluid.

DES daughters
If your mother took DES while she was pregnant with you, then you are a DES daughter or DES son.

Vaginal bleeding - irregular
If you suffer from ongoing vaginal bleeding problems, see your doctor.

Home