

American Academy of Pediatrics



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Labial Adhesions

Ordinarily, the lips of skin (labia) surrounding the entrance to the vagina are separated. In rare cases, they grow together to block the opening, partially or completely. This condition, called labial adhesions, may occur in the early months of life or, less frequently, later on if there is constant irritation and inflammation in this area. In these latter cases, the problem is usually traceable to diaper irritation, contact with harsh detergents, or panties made with synthetic fabric. Usually, labial adhesions do not cause symptoms, but they can lead to difficulty with urination and increase a girl's susceptibility to urinary tract infection. If the vaginal opening is completely blocked, there is a buildup of urine or vaginal secretions behind the obstruction.

Treatment of Labial Adhesions

If the opening of your daughter's vagina appears to have closed, or looks partially blocked, notify your pediatrician. She will examine her and advise you if any treatment is necessary.

At first, the doctor will gently attempt to spread the labia. If the connecting tissue is weak, this mild pressure may expose the opening.

If the connecting tissue is too strong, the doctor may prescribe a cream that contains the female hormone estrogen for you to apply to the area as you very gently and gradually pull the labia apart over a period of time. Once the labia are separated, you will need to apply the cream for a short while (three to five days) until the skin on both sides heals completely.

Occasionally the adhesions will return once the cream is discontinued. Know that they disappear permanently at puberty. In very rare cases, the adhesions (scarlike tissue that grows between the labia and holds them together) are so thick that they block the flow of urine. In this rare case, they will need to be separated. This must be done by the physician.