Vulvar Surgery:

About the surgery and going home



If you have been diagnosed with cancer of the vulva or a precancerous condition, you may need surgery to remove some or all of the tissue in this area.

Why have surgery?

Surgery is the main treatment for vulvar cancer and it may be used alone, or in combination with radiotherapy and chemotherapy.

The aim of the surgery is to remove the cancer or precancerous tissue. How much tissue is removed depends on the type of cancer or precancerous tissue you have, its size, position, and whether cancer cells have spread.

Your doctor will talk with you about your needs and the surgery which is most suitable for you.

Possible complications of surgery

No surgery is without risks. Some complications include wound infections, blood clots in the legs or lungs, and respiratory tract infections.

There are also some possible complications more specific to vulva surgery including:

- · wound infection
- wound breakdown
- fluid filled cysts near the surgical wound
- lymphoedema
- urinary tract infection
- altered body image
- reduction in sexual desire.

Your doctor will discuss these with you before your surgery.

About the surgery

You will be given a general anaesthetic, which means you will be asleep during the operation.

The type of surgery you require will depend on how much tissue needs to be removed. Your doctor may also need to check your lymph nodes during surgery for any signs of cancer.

What to expect after surgery

You will usually wake up in the recovery room and go back to your room when you are stable.

In most cases, you can drink and eat small amounts after surgery. You will have an intravenous drip (a small plastic tube inserted into your vein) in your arm for fluids, medications and antibiotics, as well as a tube called a catheter to drain urine (wee) from your bladder.

If you had surgery to your lymph nodes, you will also have a tube called a drain from your groin. Drains help remove fluid to prevent swelling and infection. Your catheter and drain tube(s) are usually removed a few days after your operation.

Some pain and discomfort after the operation is normal, and you will be given pain relieving tablets to help manage this. Your doctor will recommend restricting your movements at first, to reduce strain on your stitches.

Your vulva may appear bruised or swollen, and will gradually get better over the next two weeks. Some women choose to look at their vulva straight away, others prefer to wait. There is no right or wrong approach, choose to do whatever works for you.

To monitor any changes in your wound, your doctor may ask for permission to take photos of your wound after surgery which will be saved to your medical record, and may also ask you send photos once you are at home.

You should allow 6 to 8 weeks to recover from your surgery.

Caring for your wound

Without proper care, a wound in the vulva area can become infected or break down. Signs of this include patches of white or yellow tissue covering parts of your wound, or stitches reopening. You may also experience an increase in pain, fluid from the wound, a bad smell, and the area may feel hot to touch. It is important to care for your wound as wound infection and breakdown may delay other treatment.

To help avoid wound infection and breakdown, keep the vulva area clean and dry. The nurses will clean your vulva with sterile salty or warm water, then wipe the stitches with wet gauze several times a day, as well as after urination (weeing) and opening your bowels (pooing).

The nurses will also teach you how to look after your wound at home, so you feel comfortable and confident to do this yourself. A community nurse may visit you at home to help with your wound care and check how it is healing, if needed.

Going home from hospital

How long you stay in hospital after your operation will depend on what type of surgery you have, and how your wound heals. You will usually stay for at least 5 days, but your doctor may ask you to stay for up to 3 weeks, if needed.

Staff will talk to you early in your stay about your plans and arrangements for returning home after surgery. This will give them time to have everything in place which you may need.

When you are at home

It is important that you give yourself time to heal after the operation. It will take at least six weeks before you can return to your normal activities.

In particular you should:

- Clean your wound four times a day and after going to the toilet.
- Always wipe from front to back after going to the toilet. This reduces the risk of infection.
- To clean you wound, wash the vulva with warm tap water. Some women find it easier to wash with a squeezable bottle or hand-held shower head. You will then need to wipe clean the wound with wet gauze. After cleaning, gently pat your wound dry with clean gauze or cloth.
- Avoid using perfumed soaps and creams on the vulva area as these can be irritating.
- Try to stop smoking, as smoking slows the healing process.
- Use a pad between your legs to absorb any discharge from the wound.
- Do not wear underwear or tight clothing until your wound is completely healed.

- Your healthcare team will talk with you about any special care you may need to take when sitting or walking.
- Keep your activity light and easy, avoid strenuous activities and heavy lifting (e.g. anything more than 5 kilograms or about the same weight as a full bag of shopping).
- Take sufficient time away from work to ensure your wound has completely healed.
- Do not drive until you wound has healed.

If you have any questions or concerns after going home, please do not hesitate to contact the Gynaecology Oncology Care Coordinators.

Maintain good bowel habits

- Drink at least 1.5L of fluid per day (unless otherwise restricted).
- Maintain a healthy diet.

Pain relief

Before leaving hospital, your doctor will prescribe simple pain relief such as paracetamol or ibuprofen.

Sexuality

Your doctor will talk with you about when you can start having sex again.

Having treatment to a part of body that is normally intimate and private can bring up all kinds of feelings, and it can take months before you begin to enjoy sex again.

Some women find their vulva looks and feels different after surgery, and this can have an effect on your sexuality and intimate relationships.

It is important that you discuss this with your doctor, and you may also want to speak to a sexual counsellor or psychologist.

Follow up appointment

We will arrange an appointment to see a doctor between 3 to 6 weeks after your operation.

At this appointment, we will check your wound, discuss results from your operation, and make sure you are recovering from your surgery. This is also a good time for you to ask questions and to discuss with the doctor any concerns you may have.

Be aware of these signs

Please contact your local doctor (GP) or go to the nearest Emergency Department if you have any of the following symptoms:

- temperature of more than 38° C
- increase in bleeding or discharge from your wound
- hot, red, painful or smelly wound
- burning or stinging when urinating
- sudden pain not relieved by pain medication
- redness, pain or swelling in one or both legs
- difficulty breathing or feeling faint
- pain in your lungs or chest.

Contact numbers

If you are a patient of the Women's and experience any problems or have any questions once you are home, please contact:

Gynae Oncology Care Coordinators:

T: (03) 8345 3577 (Monday to Friday, 8am - 4.30pm) 5 North

T: (03) 8345 3530

(Weekends or after hours)

There are medical and nursing staff on duty 24 hours a day to help, and if necessary, arrange readmission to hospital.

Do you need an interpreter?



If you need an interpreter remember you can ask for one.

Related information on the Women's website

• Vulvar surgery: A guide to healthy eating

For more information and support

Cancer Council Victoria

Information and Support Helpline

13 11 20 (Monday to Friday, 9am-5pm)

info@cancer.org.au

cancervic.org.au

Counterpart

Women supporting women with cancer

info@counterpart.org.au

1300 781 500

www.counterpart.org.au

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