

Title Surgical and Non-Surgical (Instrumental) Method for Vaginal Tightening

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Aim

To evaluate the safety, efficacy, cost-effectiveness and organizational issues of surgical and non-surgical (instrumental) method for vaginal tightening.

Conclusions and results

A total of 186 titles were identified through the Ovid interface and PubMed. There were sixteen articles included in this review; one RCT, one cohort study, six pre and post intervention studies, four cross sectional studies, three policy documents and one guideline.

Effectiveness

There was limited fair level of retrievable evidence to suggest that surgical vaginal tightening may increase sexual function to certain extend - these effects can last up to 18 months with open surgery and for 24 months with laser surgery. Non-surgical vaginal tightening may increase sexual function in women with vaginal laxity - these effects are felt immediately and sustainable up to 12 months.

Safety

There was limited fair level of retrievable evidence to suggest that surgical and non-surgical method were tolerable and safe; adverse side effects or complications were dyspareunia, wound dehiscence, bleeding/haematoma, decrease in vaginal lubrications (surgical method); transient oedema and a tolerable heat sensation (laser); sporadic pain and vaginal discharge (non-surgical method); a few brands have received 510(k).

Psychological/Social/Ethical

There was limited fair level of retrievable evidence to suggest that surgical method for vaginal rejuvenation has variable satisfactory rate among the patient and the partner/s. The satisfaction rates among women were range from 11.6% to 87.9%. The partner/s reported a better satisfaction rate (92.6%). Non-surgical method was tolerable and satisfactory to most women. The satisfaction rate with these procedures was range between 76.5 to 93.0%. It was also noted that the distress related to the sexual activity among these women was significantly reduced. However the assessment carried out was subjective and short term effect. Medical doctors and medical students acknowledge the lack of evidence and scientific support for vaginal tightening, but most did not raise ethical objections about them.

Organizational

Three policy documents and one guideline were retrieved on the organizational issues for vaginal tightening

Cost/ cost-effectiveness

There was no retrievable evidence on the cost effectiveness of surgical and non-surgical method for vaginal tightening. In Malaysia, the fee of surgical procedures for vaginal tightening range between RM 12,000 and RM 15,000, while the fee of non-invasive laser procedures range between RM6,000 and RM10,000.

Recommendation

Based on this review, surgical and non-surgical (instrumental) method for vaginal tightening is not recommended for routine use. However, it may be used for research purpose to provide more quality evidence on long term safety and effectiveness.

Methods

Electronic databases were searched through the Ovid interface: Ovid MEDLINE® In-process and other Non-indexed citations and Ovid MEDLINE® 1946 to present, EMBASE – 1996 to August 2017, EBM Reviews - Cochrane Central Register of Controlled Trials – August 2017, EBM Reviews - Cochrane Database of Systematic Reviews - 2005 to August 2017, EBM Reviews - Health Technology Assessment – 4th Quarter 2016, EBM Reviews – NHS Economic, Evaluation Database 1st Quarter 2016. Searches were also run in PubMed. Google was used to search for additional web-based materials and information. Additional articles were identified from reviewing the references of retrieved articles. Last search was conducted on 4 August 2017.

Further research/reviews required

Written by

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