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Metoidioplasty

Clitoral Release

by Author

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Metoidioplasty is a procedure that enables the clitoris to be released from its "hood" and then appear as a small penis. A form of circumcision can be performed at this time to enable the tip of the clitoris to appear as the male glans.

Besides de-hooding the clitoris, the under-surface of the structure, known as the chordee, must be freed of its dense fibrous tissue to allow the entire structure to be free of surrounding tissues and release it to allow more exposure. This technique may also provide some additional length, though it is somewhat limited in this regard. Care must be taken to avoid injury to the internal erectile tissues during removal of this fibrous band so as not to lose that important function.

The labia minora are used as flaps to provide protection of this denuded under-surface of the clitoris and to provide additional girth and circumference.

The labia majora are descended from their natural position using plastic surgical techniques, and pockets are created within them to allow the placement of testicular implants. This simulates a male scrotum with testicles. At a later stage, or in the initial procedure this divided scrotum may be joined centrally to have the appearance of a single scrotum with two testicles within. Expanders may be used to enlarge the "scrotal" pockets prior to placement of permanent implants, but this is usually not necessary. It does also require additional surgery. The testicular implants usually descend further on their own due to their weight and the effects of gravity.

As an option, along with metoidioplasty the urethra may be advanced to the tip of the new penis. A vaginal mucosal flap is used for the extension of the urethra from the native urethral opening (without disturbing that opening directly and endangering sphincter function). In this situation the labial minora flaps are used to protect the vaginal flap urethral extension as well as provide girth. This procedure is more complex and entails additional risks such as fistula formation (urinary leakage).

It is important to recognise that this is not formal phalloplasty and that the result will depend in great part upon the size of the clitoris and its enlargement under the influence of hormones.

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