Aesthetic Gynaecology: Challenges & Recommendations

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OUTLINE

- Challenges of Aesthetic Gynaecology
  - Relatively new emerging subspecialty / highly expanding
    - High Customer's Demands / Normal “ideal genitalia”
  - Overlap between Cosmetic & Rejuvenations
  - Efficacy? Evidence Base Lacking need more Research
  - Leading Gynecological Associations Statement Aesthetic Gynecology
  - Training Aesthetic Gynecology world wide
  - Multidisciplinary Specialty: Gynecologist / Dermatologist / Plastic Surgeon / Urologist /Urogynecologist & Psychiatric

- Effects of the Media Advertising on the practice

- Ethical Implications & Recommendations
✓ A relatively new specialty that has gained popularity & Rapidly expanding worldwide (non-surgical procedures)

✓ Aim to: Correct, modify, Reshape & Beautify any changes in the female genital area / Reproductive system (Restore Functional or regenerative rejuvenations)

✓ Correct Changes as a result of Advanced age; Repeated births; Pelvic muscle problems menopause; or Birth defects from the time of birth
✓ The concept of "women’s Health" has changed dramatically. From Prevention & Treatment of diseases to “improve the quality of life”

✓ The concept of body and sensation (pertaining to visual Appearance & Sensation)

✓ Women's needs vary according to needs and necessity

✓ The difference between NEEDS (medical & Jurisprudence)
Growing fascinating “Perfect body” in this era

Involving multiple disciplines
Appearance of the external genitalia &
Functional concerns to improve the sexual
wellness or quality of life

“Perfect genitalia “

✓ It is a promising specialty. Experts expect it to be one of the cosmetic trends in the coming few years
✓ India rise from 3.9% in 2012 to 28.97% in 2015 labial peels & PRP. Serious evidence for efficacy is lacking (Desia SA, 2018)
American Society of Plastic Surgeons (ASPS) statistics

ISAGSS Report 2018 - Aesthetic Genital surgeries

TOTAL increase by 11 millions in 18 years

Non Surgical Procedures

- 1997-2015 (18y) 1.5 millions to 12.7
  11 millions increase

- Mainly in Non-Surgical Procedures
  10,879,909 (85.7%)

- Surgical very slight increase / platu
  1 million to 1.9 only

✓ Annual amount spent on all cosmetic procedures in the USA in 2018 **16.5 billion USD**

1- Labiaplasty – Labia Minora reduction “Labiaminoraplasty”

- Most frequent surgery Globally
- 10 x more than pelvic floor reconstruction - 2018
- 2015 & 2016 increase in FGCS by 39% (age < 14 y)
- 2012 & 2017 (5y) - increased by 217.3%
- 90% age group 19-50
- 55.3% 19-34 years old / 4.3% ≤ 18 years
- 34.2% 35-50 years old / 5.6% 51-64 y

Clitoral hood reduction: “Clitoral hoodoplasty” “clitoral hoodectomy”
• Removal of excess skin tissue over the clitoris & reduction of the head covering the clitoris
• Usually done simultaneously with labiaplasty

Labia Majora Augmentation & Reduction “Majoraplasty”

2- Vaginal tightening (vaginoplasty) “Surgical vaginal rejuvenation”
- Anterior & Posterior Colporrhaphy
- Lateral colporrhaphy
- Perineoplasty “Perineoraphy” or “Perineal aesthetics”
- Colpoperineoplasty / Hymenoplasty
3- Fractional **vaginal laser**, genital **RF** & **PRP**
4- Carboxytherapy (Carbon dioxide gas insufflations)
5- Vaginal **HIFU** (Focused ultrasound)
6- Genital **mesotherapy**
7- **Thread** applications for vagina & external genitalia
8- **Magnetic chair HIFUM**

Recent years, an **incredible trend** has been followed by patients towards female genital aesthetic
Genital Aesthetic Functional Applications

✓ Elimination of menopausal complaints
✓ Treatment of varicose veins in the genital area (vulvar)
✓ Treatments of genital warts
✓ Removal of benign tumors
✓ Manage pain in sexual intercourse
✓ Treat vulvar vestibulitis, vaginal dryness, & lichen sclerosis
What is behind this rapid increase

Internet & Social Media networking Significant Impact

Global village
NORMAL VARIATIONS IN THE VULVA

Internet started dictating STANDARD NORMS for “normal appearance”
Perception of ideal external female genitalia or ideal labium appearance differs between countries


Different techniques & Approaches FGCS

increased negative psychological responses, embarrassment, anxiety & insecurity
What is behind this Rapid Increase

✓ Internet & Social Media Advertising
✓ Idealization of the perfect body & Perfect genitalia
✓ “Designer vulva” or “Barbie doll vulva”

PSYCOLOGICAL IMPACT

Women feeling anxious, insecure with lower self-esteem

- Trend of hairless pubic (Lasers or Brazilian wax) increase self-examination of External Genital
PSYCHOLOGICAL IMPACT

• Unrealistic expectation by the male partner - usually derived from the exotic movies, magazines, decreased society inhibitions, cultural change with acceptance of exhibitionist tendencies of human body, and increasing materialism

• Majority of women undergoing labiaplasty found to be Narcissistic personality or histrionic personality OR suffering from body dysmorphic disorder (BDD) (Brotto LA et al., 2019)
Other factors contributes to expanding the NON-SURGICAL approach for FGC

✓ Less Cost – Day case or in the clinic / No Hospitalization

✓ Quick - few hours & Rapid recovery / No General anesthesia

✓ Good for relatively elderly with chronic disease / Less absent from home & work
✓ The lines between medically necessary operations such as vaginal/pelvic reconstructive surgery and elective surgeries such as vaginoplasty and labiaplasty are blurring and can now be performed at the same time

✓ Both function and beauty are becoming addressed together and not separately

3- No Scientific evidence for most procedures done

✓ No scientific evidence to support the safe and efficient use of over-the-counter products (e.g. topical vaginal tightening products) for treating Vaginal laxity

✓ No supporting evidence regarding the use of injectable volumizers like hyaluronic acid (HA), platelets rich plasma PRP, and physical devices (such as Gore-Mycro-mesh and silicone threads)


✓ the expanding use of HA and collagen in genital plastic surgery and reconstructive surgery has led to increased pulmonary complication

Energy-Based Devices EBD

• Restore the **Elasticity** of the connective tissue of the vaginal wall at 40°C - 42°C
• Improves the vaginal **lubrication & humidity** of the vaginal mucosa
• Vaginal rejuvenation are fascinating
• **Rx** 8-30 min 2x ? Touch up 12-18 m / painless
• Improve mild SI, dryness, overactive bladder, grade I prolapse, orgasmic dysfunction & VL
• **2018**, USFDA warned against for vaginal rejuvenation or vaginal cosmetic procedures and has declared that the **efficacy & safety** of these devices in such procedures are not yet established
Minimally Ablative fractional Safe, Accurate & Efficient (resurfacing & regeneration of the V skin

Widely used in vaginal tissues

CO2 (10,600 nm)
Erbium: yttrium-aluminum-garnet (Er:YAG) 2940 nm Gold M et al., 2014

Short-term Results, Small sample size, & Lack of Randomization
2 - High-Intensity Focused Ultrasound (HIFU)

Deep penetration / **ultrasound** very high frequency / Heat tissue up to **75°C (65-75°C)** / Complications **adhesion**?

Recently introduced in the treatment of VL, with acclaimed promising effects. However, there are NO published articles to support this claim yet (AL-Mousa N et al., 2022)
Lack solid scientific evidence long-term benefits

3- Radiofrequency
Non Surgical cryogenic surface cooling  

*Ulubay et al., 2016*

- Transurethral monopolar RF/ Rx SUI
- Increase papillary dermis NERVE Fibers  *(Gold M et al., 2018)*
- Sexual pleasure treatments - RCT Prove effectiveness  *(Robinson D et al., 2003)*
- **Neocollagenesis & Neoelastogenesis in submucosa**  *(Leibaschoff G et al., 2016)*
- Non ablative device - **Vaginal Rejuvenation & Tightening**
- **External genitalia** Tightening & Resurfacing  *(Sadick N et al., 2014)*
Radiofrequency & HIFU

- **RF Heat** the vaginal tissue optimum needed temperature **42°C** to produce Collagen

- **RF & HIFU** induce **Neocollagenesis** in the middle and lower reticular dermis & **Neoelastogenesis** in the deep reticular dermis

- **RF** affects tissue **more diffusely** VS **HIFU** more **focal** collagen induction
Vulvar Rejuvenation by HIFU

Promising, safe & extremely effective adjuvant alternative to support the treatment of unsightly conditions in the female intimate region

As good as Radiofrequency, Fractional laser & plasma injections

Promote intense neocollagenesis in the dermal tissue

40 days after HIFU Rx Ultraformer III® manufactured by CLASSYS INC., Seoul, Korea
HIFUMI - Magnetic Stimulation Chairs

Electromagnetic waves very strong
11x Kegel exercise

High Intensity Magnetic Stimulation
Generate magnetic pulses stimulate
muscles contractions

Improve UI & Intimate Satisfactions
Fecal incontinence
PRF mixture of **platelets**, **leukocytes**, **cytokines**, & **circulating stem cells** that is optimal for **stimulating fibroblast migration and proliferation**.

Rapid remodeling & connective tissue growth after vaginal surgery

Injection of O spot sexual pleasure

Risks of PRP therapy as **infection**, **bleeding**, and **nerve damage** appear to be **minimal**.

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**Galal et al., 2021**

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**Platelet-Rich Plasma (PRP) in Obstetrics and Gynecology**


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**ABSTRACT**

**Background**: Platelet-rich plasma PRP is being used as a new therapeutic option for different pathologies in the field of dermatology, such as trichology, wound healing, and cosmetic medicine. Platelet-rich plasma is an exciting new technology that may have the potential to serve as an alternative or adjuvant treatment to surgery in many common injuries/conditions in sports medicine. The growth factors provided by platelets and plasma are essential to the tissue repair process. It could have its effect due to the microenvironment of the tissue. It is used within the tissue’s specific processes for healing, or PRP’s possible ability to enhance stem cell proliferation, depending on its preparation, activation, and variable contents. Accordingly, it may be effective treatment for some gynecological and obstetrical conditions.

**Aim of the work**: We conducted this essay to confirm PRP efficacy and safety in various obstetric and gynecological disorders.

**Methodology**: Relevant citations were extracted from PubMed, Google scholar, Clinical key, Scopus, Medline, Embase and Cochrane to identify studies investigating the uses of PRP in gynecology from 2010 to 2020.

**Conclusion**: PRP is an innovative therapeutic modality, as it is affordable, simple, easily performed, and effective. In the field of gynecology, the risks of PRP therapy as infection, bleeding, and nerve damage, appear to be minimal.

**Keywords**: Platelet-Rich Plasma, Obstetrics and Gynecology.
PRP & FEMALE SEXUALITY

**Easy** to apply & **fast** has almost no adverse effects owing to it being **autologous**. Administration to the lower anterior vaginal wall may **improve female sexuality with high satisfaction**

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**Platelet-rich plasma administration to the lower anterior vaginal wall to improve female sexuality satisfaction**

*Kadın cinselitinde memnuniyeti artırmak için alt ön vajinal duvara trombositçe zengin plazma uygulaması*

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*Lack of randomization and lack of control group to be performed with a placebo and retrospective design*
Aesthetic gynecology and Leading Gynecology Associations’ approaches
Women requesting labiaplasty should be provided:

- Accurate information about the normal variations in female genitalia & offered counselling & other psychological treatments body image distress
- Education, Support & Advice should be at the heart of clinical practice, with a sympathetic appreciation of female body insecurities
Even though children aged 16 or over can consent to surgical procedures, FGCS should not normally be carried out on women and girls under 18 years of age, irrespective of consent, full genital development is not normally achieved before the age of 18.

Labiaplasty, patients must be informed about the risks & the lack of reliable evidence its positive effects.

- GP & Practice nurses should have access to accurate genital variation.
▪ The RCOG, the British Association of Aesthetic Plastic Surgeons (BAAPS) & Department of Health, advised by appropriate lawyers, should provide guidance concerning potential overlap between FGCS and FGM

▪ The RCOG, BAAPS, Reconstructive and Aesthetic Surgeons (BAPRAS) should provide updated clinical guidance and standards to assist doctors working in this field

▪ Essential all surgeons who undertake FGCS keep written records of the physical & mental health reasons to perform FGCS

▪ Consent forms and details of the information provided to the woman
- **Clear data** about FGCS need to be collected in both the NHS and private clinics on incidence, age of patients, nature of surgery, reported reasons for surgery and patient follow-up

- Any advertising of labiaplasty or other FGCS procedures conforms to **good medical practice** and is subject to Advertising Standards Authority codes

- Advertising should not mislead people concerning what is normal or what is possible, and should include information about the lack of robust evidence concerning risk

- Labiaplasty for cosmetic reasons **NOT proper use of public resources and should not be provided by the NHS**
✓ There is no clear evidence for the effectiveness and safety of cosmetic genital surgery. This means that ethically impermissible

✓ Obstetrician-gynecologists should not offer, recommend, perform, or refer for cosmetic genital surgery

✓ If a patient expresses **an interest in or requests** FCS, SHOULD BE explain that there is no clear evidence of effectiveness or safety

✓ Will prevent unmanageable economic conflicts of the interest on the part of the obstetrician-gynecologist.

**Figo Committee** For The Ethical Aspects Of Human Reproduction And Women’s Health. Ethical considerations regarding request and offering of cosmetic genital surgery. *Inter J Gynaecol Obstet.* **2015;**128:85–6. [PubMed]
in the case of requests for **Mammoplasty & Labiaplasty**, patients, especially **Adolescents**, and their families be informed about:

- ✓ Normal variations and physical changes, that the patient’s physical
- ✓ Emotional development had to be evaluated
- ✓ Consultation about non-surgical techniques should be provided

*American College of Obstetricians and Gynecologists, ACOG Committee Opinion No 686. Breast and labial surgery in adolescents 2017;129:17-9*
2007, ACOG- Not supportive
2011, ACOG- Extensive evidence-based work on the effectiveness & Reliability
2013, Canadian Society OB – Medical, Sexual & Gynecological histories has to be taken when Gynecological cosmetic procedures
2013, RCOG ethical considerations FGCS (NOT < 18 y, any advertising conforms to good medical practice
2015, IFGO: Therapeutic & Non medical indications/ normal anatomical variations / Role out any mental problems (BDD) / Competency of the surgeon
2017, ACOG Adolescents, and their families informed normal variations and physical changes, evaluated, consultation NS
Female genital mutilation:

✓ All procedures involving **partial or total removal of external genitalia**
✓ No Health benefit
✓ **Human Rights Violation** – **NO** patient consent

Female genital cosmetic surgery

✓ Related to genital destruction
✓ Consent present and patient request

Genital Aesthetic Surgery NOT included neither in medical education nor in residency programs
Aesthetic Gynaecology Training

✓ Training different from one country to another

✓ Is it mandatory to be a Gynaecologist before you Specialised in Aesthetic Gynaecology?

✓ All agreed that Aesthetic Gynaecology should be FULLY aware about the Anatomy and Physiology of the female genital tract

✓ What are the minimal training? & Experience before you practice alone

✓ Do we need accreditation / Classifications as new subspecialty

✓ Can be classified under URO- GYNAECOLOGY OR Separate as Aesthetic Gynaecology subspecialty
Satisfactory Aesthetic Results

Safety

Patient Satisfactions

Correct any Complications

Competency

Age & needs

Anatomy & Morphology
Emerging Field for Dermatologist

Peels, PRP, EBD & surgical modalities have been in use, though serious evidence for efficacy of many of these procedures is lacking.
Dermatological & Gynecological Conditions Lead to the emergence of Aesthetic Gynaecology

- **Aging changes**
- **Pigmentary diseases**
- **vaginal atrophy**
- **Stress Urinary Incontinence**

Dermatology Non Surgical Lasers are best known & used by them

Gynaecology Uro-Gynaecology

**Aesthetic Gynaecology**

- Vaginal Laxity
- Urology
Organizations & Associations conduct training in AG

✓ ILAMED - Institute of Laser & Aesthetic Medicine – Germany 18 y : (1y) Fellowship in Cosmetic gynecology & Sexual Medicine / FCGSM (Surgical & non surgical live session and hands on)

✓ AAA - American Aesthetic Association USA (8 y)

✓ ABAG - American Board of Aesthetic Gynaecology - USA Medafia conference Dubai UAE

✓ ESAG - European Society of Aesthetic Gynecology London – Dubai- Athens

✓ IAAG &SW - International Association of Aesthetic Gynecology & Sexual Wellbeing

✓ EIAUG – Egyptian International Aesthetic Uro-gynaecology Associations

✓ ICCG - Indian College of Cosmetic Gynecology

✓ ABAM - MED courses and conference –UAE (Master )

✓ Fellowship in cosmetics gynecology – AECS (All & Every where conference and seminar (Dubai)/ ISAGSS

✓ CME - KSA
Masters Course in Cosmetic Gynaecology (MCCG) 3m
Masters Course in Cosmetic Gynaecology (MCCG) has become one of the most happening subspecialties of elective surgery for women.

Fellowship in Cosmetic Gynecology & Sexual Medicine (FCGSM) 1 year
Cosmetic Gynecology has become one of the most happening subspecialties of elective surgery for women and includes specialists in..

6 MONTHS Diploma Course in Cosmetic Gynaecology (DCG) 6m
Cosmetic Gynecology has become one of the most happening subspecialties of elective surgery for women and includes specialists in
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Surgical & Non-Surgical Female
Genitalia Cosmetic
Procedures & Treatments

This course is offered by the European Society of Aesthetic Gynecology, ESAG, features an acclaimed expert in the field of vaginal rejuvenation, Dr. Alexandros Bader.

More Info ➤
FELLOWSHIP IN COSMETIC GYNECOLOGY

August 16 - 18, 2018 | Dubai, UAE

ONE - ON - ONE
HANDS ON TRAINING

Aesthetic Gynaecology: Challenges & Recommendations

Dr. Hanan A. Sultan

2nd EIAUG
4-5 May 2023 - Cairo

International Association of Aesthetic Gynecology & Sexual Wellbeing

Fellowship 3 days (hands on training)

OB/GYN – Urogynecology
Dermatologist
Plastic Surgeon & Aesthetic Physician

INTERNATIONAL ASSOCIATION OF AESTHETIC GYNAECOLOGY AND SEXUAL WELLBEING

FELLOWSHIP 3 DAYS (HANDS ON TRAINING)

OB/GYN – Urogynecology
Dermatologist
Plastic Surgeon & Aesthetic Physician

CLINICAL CASES
Surgical Cases: Labiaplasty, Surgical Case, Incontinence Vaginoplasty, Posterior Repair, Non-Surgical Cases: PRP and HR for Vaginal Enlargement, Laser Vaginal Tightening, Labiaplasty, Lifting by Radio Frequency, Vaginal Rejuvenation, G-Spot Augmentation, D-volt etc.

WHO SHOULD ATTEND?
Gynecologists, Dermatologists, Urogynecologist Plastic Surgeons, Aesthetic Physician

Dr. Sherif Wakis
Founder and Director of El Sie Clinic, President of the International Association of Aesthetic Gynecology and Sexual Wellbeing (AIAUG), Vice President of the Royal Academy of Aesthetic Medicine (RAMAM)

Dr. Dawid Serafin
One of the first pioneers in Poland specialized in Aesthetic Gynecology, Vulva-Vaginal disorders and aesthetic corrections, licences Aesthetic Gynecology and Member of European Society of Aesthetic Gynecology

COURSE CONTENTS
• History and Statistics
• Consultation and Patient Selection
• Patient Pain and Anxiety
• The O-shot (Vaginal Rejuvenation with PRP)
• G-spot Augmentation
• Non-invasive laser therapy for vaginal health
• Treatment using micro-injections of carbon dioxide to increase vascularisation by Carboxytherapy
• Use of radiofrequency to improve the elasticity and function of the internal vagina by Thermiva
• Hyaluronic Acid (HA) in Vaginal Rejuvenation
• BOTOX Treatment for Vaginismus
• Intimate Bleaching: Depigmentation of the Vulvar Area
• PDO thread lift for Vaginal Rejuvenation
• Laser Vaginal Rejuvenation for Vaginal Laxity and Vaginal Atrophy with CO2 Laser
• How to market these treatments into your practice

REGISTRATION / QUERIES
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Egyptian International Aesthetic Urogynaecology Associations

- ✔ FAT Transfer
- ✔ Filler
- ✔ PRP
- ✔ Thread
- ✔ Urinary Incontinence

Workshops

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<td>Fat Transfer (Operative hands on)</td>
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<td>Fillers</td>
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<td>Threads (Advanced hands on)</td>
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<td>Urinary Incontinence (Operative hands on)</td>
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American Academy of Aesthetic Medicine Masters in Cosmetic Gynecology

Course Date: 7-8 Jun 2023 | Course Venue: United Arab Emirates - UAE

Course Conducted by

American Academy of Aesthetic Medicine
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Course Accredited by

IBC
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Role of Social Media Advertising & Internet on Female Cosmetic Gynecology

World turned into a global village

Source of information is very important / Who is responsible
Is it all right (information's & images) / Use of photoshop

✓ Communications turned to be very high & speedy. World interconnected with each other – Rapid spread of any information
Advertise for girls
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Ethical Implications in Aesthetic Gynaecology

✓ Full history & Examinations & necessary Investigation

✓ Informed Consent / Youth 14-18 y

✓ Surgeon Competency (procedure & deal with complications)

✓ Discuss success rate & complications – realistic expectations

✓ Conflict of Interest & Honest with your patient
Recommendations

✓ More Research RCT / improve sample size / Multicenter studies / Pt & Public educations
✓ Accreditations of practice – Gyn subspecialty
✓ Well structure training & include it in residency programme
✓ Follow Gynaecological Association statements
✓ Ethical implications & Regulations
✓ Control media Advertising to include real & accurate information
✓ Control Aesthetic Tourism
✓ Individualized the **technique of surgery** used with great consideration of the patient’s preferred goals with realistic expectations
✓ inform patients about **normal variations**
✓ Perform **psychological evaluations**, & discuss realistic expectations
✓ Surgeon’s **training & Skills** / comfort level with the various techniques must be considered
✓ Muslims cultures need Fatwa particularly we are dealing with “ Major Awardah”
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