

What are fused labia?

Usually the labia (the lips of skin on either side of the opening of the vagina) are separate, with a clear opening between them. But sometimes the labia are stuck together, leaving a smaller opening (or rarely, no opening). This is called 'fused labia', or 'labial adhesions' or 'labial agglutination'. Fused labia most commonly occur when girls are between the ages of about 6 months and 6 years.

The labia always separate as a girl gets older and the levels of the hormone oestrogen rise in her body, but if there are any problems the labia can be separated earlier.

Labial agglutination is usually painless. In fact, most parents and children do not notice the condition until a parent or doctor sees the genital area. In some cases, the condition is noticed because the skin is interfering with urination.

The causes of fused labia

The labia are normally separate at birth, and for a couple of months after birth, because oestrogen from the mother has crossed through the placenta to the baby.

After 3 to 6 months, when oestrogen levels have become very low, the labia may become stuck together, possibly because of irritation of the skin – maybe nappy rash, or not keeping the skin clean, or irritation due to

some products such as soaps or bubble bath.

Rarely the irritation causing the labia to become fused is due to chronic sexual abuse, but this is not the usual reason for fused labia.

What problems can occur?

Small amounts of urine may get trapped inside the membrane, and the girl can get an infection, and irritation of the skin and lining of the vagina.

Sometimes a girl may have repeated bladder infections.

Sometimes there can be difficulty with toilet training, because a little urine gets caught above the fused labia (inside the vagina), and leaks out after she gets off the toilet, wetting her pants. This can be confusing for a very young child who feels like she has let all her wee out, only to have some more trickle out.

Pulling the fused labia apart can be painful, and there can be a little bleeding along the edges of the labia. As the labia heal, the edges can fuse together again.

What needs to be done?

Mostly, fused labia do not cause problems, and they separate without any treatment as the girl gets older, and her oestrogen levels rise. Hence most girls do not need treatment.

If she has irritation around the labia, or bladder infections, it may be helpful to separate the labia.

The labia should not be just pulled apart. This would probably hurt her, and often they will fuse back together again.

Anything that could be irritating the skin should be stopped (for example bubble bath).

Treating labial agglutination with hormone creams

Sometimes the doctor will prescribe a hormone cream. The hormone cream contains oestrogen. Put a pea-sized amount every day on the place where the labia are stuck together. Use a cotton swab or fingertip to gently apply the cream along the line of the fused labia. The cream may take a few weeks to open the labia.

Sometimes, this cream will make the skin around the vagina change colour. The skin colour will go back to normal after the treatment.

Sometimes, when the cream is used for a long time, or in large amounts, it can make a girl's breasts grow a little. This is a normal and temporary side-effect. Your child's breasts will go back to normal once the treatment is stopped.

Mild cases

If the labial agglutination is small and your child can go to the bathroom without problems, your child may not need treatment. You will be asked to apply a barrier cream such as petroleum jelly (Vaseline) or zinc oxide on the labia. This will keep the labia from sticking together any more. As your daughter gets older and she begins to produce her own hormones, the labia will probably stop sticking together on their own.

If the skin is sticking together more than before or if your daughter has trouble going to the bathroom, you should take her to the gynaecology clinic for another examination.

Rarely if the join is strong, does not separate with oestrogen cream and there are health problems, then your doctor might advice labial separation under an anaesthetic.

Other things parents can do to help

Zinc oxide or petroleum jelly (Vaseline) cream can be applied 2 to 3 times a day to keep the skin moist.

Teach your daughter to spread her legs wide when she goes to the bathroom, and to wipe herself from front to back.

A warm shallow bath every day will help soften the skin and keep the area clean. Oestrogen cream, petroleum jelly, or zinc oxide should be put on after the bath.

Do not use strong soaps, perfumes, or bubble bath. These can irritate the skin around the vagina.

Do not try to force open the labia.

Do not try to pulling or force the labia open in any way. This will be painful and will distress your child. It can damage the skin. It can also cause problems in the future: your child may get scared if she needs to be examined again.

Stopping labial agglutination from happening again

Labial agglutination can come back. To stop it from coming back, keep using barrier creams such as petroleum jelly and zinc oxide on the labia. This will keep them moist and stop them from sticking together.

If the problem does come back, use oestrogen and barrier creams as before. When you daughter begins puberty, labial agglutination will probably not happen again.

Contact Mrs. Latthe's secretary if you have further queries (0121 472 1377)

Author: Mrs. P. Latthe
Consultant Gynaecologist

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[Birmingham Women's NHS](#)
[Foundation Trust](#)
Edgbaston, Birmingham B15 2TG
Telephone: 0121 472 1377

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