Decision Aids:
Selecting the Right Surgery for Yourself

*We designed the tables below for easy side-by-side comparison of surgery options. The outcomes data shown reflects only *our* center's outcomes.

Vaginoplasty: With vs. Without a Vaginal Canal | Penile-Inversion vs. Right Colon Vaginoplasty

Comparison: Vaginoplasty WITH versus WITHOUT Creation of a Vaginal Canal

The table below contains the anticipated *costs*, *benefits*, and *risks* associated with each surgery, based on our Cedars-Sinai Transgender Surgery Program outcomes. The outcomes for the categories above the **bold** line are all the same for both surgeries, while the outcomes for the categories below the **bold** line differ for each surgery.

Outcome Categories	Shallow Depth Vaginoplasty	Full Depth Vaginoplasty
Elimination of ALL male genital anatomy	Yes	Yes
Creation of normal-appearing female genital anatomy: a vagina with clitoris and hood, pink vulva, a urethral opening in appropriate female location, a vaginal dimple (i.e., folded skin that leads to non-visible vaginal canal, when present), inner labia, and outer labia)	Yes	Yes
Clitoris has touch and pleasure sensation, capable of achieving orgasm	Yes	Yes
Urination from a urethral opening that is normal in appearance and location for a cis-gender woman	Yes	Yes
Having to complete permanent hair removal from your penis shaft (usually requires 6-12 months of treatment) BEFORE your vaginoplasty surgery (if you have not already completed permanent hair removal)	Yes	Yes
Risk of requiring surgery (outpatient) to correct a "spraying" or deviated urinary stream	Yes (20% risk)	Yes (20% risk)
Risk of requiring an additional surgery (outpatient) to correct separation of the clitoris-hood skin	Yes (10% risk)	Yes (10% risk)
Having to complete permanent hair removal from your ENTIRE SCROTUM (usually requires 6-12 months of treatment) BEFORE your vaginoplasty surgery (if you have not already completed permanent hair removal)	No	Yes
Number of expected clinic visits during the first 3 months after your vaginoplasty surgery	~3 visits	~7 visits
Having to DILATE your vaginal canal for 20 minutes each time, starting 6 days after your surgery: 3X per day (months #0-3); 2X/day (months #4-18); 1X/day months #19-36; and 1X/ every other day from month #37 onward (i.e., for the rest of your life)	No	Yes
Having to DOUCHE your vaginal canal once daily for the first 3 months after surgery, and then typically every other day thereafter, for the rest of your life	No	Yes
Risk of requiring an additional outpatient surgery to correct narrowing/tightness from obstructive scar-tissue at the vaginal canal opening	None	Yes (20% risk)
Risk of losing *some* vaginal canal *depth* (≤ 2 inches) after surgery (If this happens you would require ≥1 inpatient surgery)	None	Yes (5-10% risk)
Risk of losing *all* vaginal canal *depth* after surgery (If this happens you would likely require colon vaginoplasty replacement surgery)	None	Yes (3-5% risk)
Risk of experiencing tightness/narrowing of your vaginal canal that prevents intercourse (Would likely require additional surgery)	None	Yes (10% risk)

1. Dadashian EL, Sandhu S, Stelmar J, Garcia MM. PD22-13 Significant reduction in neourethra stricture and fistula incidence among transgender men after phalloplasty with urethral lengthening: a review of outcomes, prevention strategies, and a new device. *J Urol*. 2025;213(5S):e822. doi:10.1097/01.JU.0001110000.68878.91.13

Comparison: Penile-Inversion Vaginoplasty versus Right Colon Vaginoplasty

The table below contains estimated outcomes for each surgery based on a review of actual clinical outcomes from the Cedars Sinai Transgender and Health Program.

Outcome Categories	Penile-Inversion Vaginoplasty	Right Colon Vaginoplasty
SENSATION & FUNCTION		
Naturally self-lubricating tissue lining (Note: neither canal option offers ability of canal to become lubricated ("wet") with arousal)	No	Yes
Maximum vaginal canal depth	14-15 cm (5.5-5.75 in.)	18-20.5 cm (7-8 in.)
Degree of erogenous sensation *specifically* from the vaginal canal	~0%	~0%
APPEARANCE/OUTCOME		
Natural "odor" arising from the vaginal canal	"Fishy"	None
Color of vaginal opening	Color of penis & scrotal skin	Reddish-Pink
MAINTENANCE		
When does daily vaginal dilation and douching commence?	Day #6 after vaginoplasty	None after SDV; only Day #6 after Stage 2
Vaginal Dilation Schedule: Starting 6 days after your surgery, Months #0-3: 3X per day; Months #4-18: 2X per day; Months #19-36: 1X per day; and from month #37 onward for the rest of your life: 1X every other day	Yes	Yes
Frequency with which you must DOUCHE your vaginal canal, starting 3 months post-op, through rest of life	Every other day	Daily
VARIOUS SURGERY RELATED ITEMS		
Number of surgeries required to complete the vaginoplasty	One (but 20% of patients require a second revision surgery)	Two
Required permanent genital hair removal (from the listed areas) before vaginoplasty	Penis & entire scrotum	Penis (only)
Number of expected clinic visits during the first 3 months after your vaginoplasty surgery	~7 visits	3-4 visits
COMPLICATIONS		
Risk of requiring a temporary colostomy (duration: 3-4 months) after surgery	~1%	0%
Risk of requiring an additional outpatient surgery to correct narrowing/tightness from obstructive scar-tissue at the vaginal canal opening	20% risk	15%
Risk of losing *some* vaginal canal *depth* (< 2 inches) after surgery (If this happens you would require >1 inpatient surgery)	5-10% risk	0%
Risk of losing *all* vaginal canal *depth* after surgery (If this happens you would likely require colon vaginoplasty replacement surgery)	3-5% risk	0%
Risk of experiencing vaginal canal tightness/narrowing that makes receptive intercourse impossible (Requires additional surgery)	10% risk	0% risk
Risk of experiencing a sufficiently "bumpy" recovery course post-op that return to work is delayed past 6 weeks post-op	10-15% risk	After Stage I (SDV): <1% After Stage II (Colon): <1%
Risk of experiencing "vaginal canal prolapse" post-op	~0% risk	2% (fixable with surgery: 100%)

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