

Your Vulvar Surgery

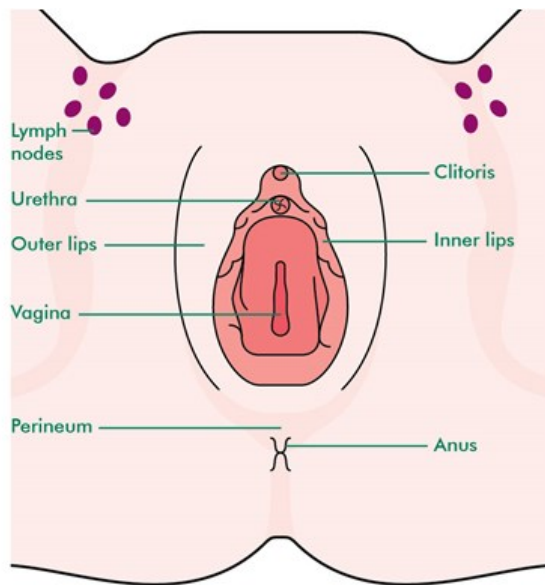
Your Gynecologic Oncology Surgeon has scheduled you for vulvar surgery. This handout offers you information about vulvar surgery. It is important you and your family member/partner-in-care read this handout.

Why you need vulvar surgery

You may need to have vulvar surgery because you have a benign, precancerous or cancerous area on your vulva. Benign means that it is not cancer.

You may also need to have some of your groin lymph nodes removed. You and your surgeon will discuss what type of vulvar surgery is best for you. A pathologist will test all tissue removed during surgery. A pathologist is a doctor who examines body tissues and fluids for changes caused by disease.

A picture of your vulva



Different types of vulvar surgery

You and your surgeon will discuss what type of vulvar surgery is best for you.

☐ Vulvectomy / Wide Local Excision

The pre-cancerous or cancerous area is cut out of your vulva and the skin is stitched back together.

☐ Lymphadenectomy (or lymph node dissection/biopsy)

Removal of your lymph nodes in your groin area. This is done to remove lymph nodes that have cancer and other lymph nodes when there is a high chance of cancer spreading there.

Your surgeon may remove only a few lymph nodes with a sentinel node procedure. A special dye is used to help the surgeon see the right lymph nodes.

☐ LASER

High energy light waves are used to burn the precancerous disease away.

If your tumour is cancer

Surgery may be the only treatment needed to manage your cancer. You may also need to have radiation and/or systemic therapy treatments. You will be given the information you need if this applies to you. Your healthcare team will give you the information and support needed to make the right choice for you. Deciding what is the right choice for you can depend on:

- The cell type of your cancer
- The stage of your cancer
- Your age and overall health
- Your feelings about the treatment

Your healthcare team

This is a list of the healthcare team members you may see.

Gynecologic Oncology Surgeon

Your surgeon will tell you what type of surgery you need to have. Your surgeon will work with your healthcare team to guide your care before, during and after your surgery.

Nurse Navigator/ Nurse Practitioner

Your nurse navigator and nurse practitioner will offer support and help plan your care with the surgeon and healthcare team.

Registered Nurse/ Registered Practical Nurse

Nurses will care for you before and after your surgery. They will give you the support, medications and information you need while in hospital.

Social Worker

Social workers are trained in counselling techniques to help you solve problems, make decisions and improve your coping skills. A social worker offers support and information to help you and your family member/partner-in-care with your worries or concerns. Ask a member of your healthcare team to refer you to a social worker.

You may have a hard time with your emotions or feelings about vulvar surgery. This may have an impact on your recovery from surgery. Talking to a social worker about this can be helpful. Ask a member of your healthcare team to refer you to a social worker.

Registered Dietitian

Dietitians specialize in nutrition counselling and education. A dietitian is available to talk with you about what to eat and drink to help you recover from your surgery. Ask a member of your healthcare team about a referral to a dietitian.

What you can expect after your vulvar surgery

Bring a maxi pad with you to the hospital on the day of your surgery. You need a maxi pad to protect your underwear. You may go home the same day after your surgery or you may need to stay in hospital for 2 to 4 days. This depends on the type of vulvar surgery you have. Each person recovers differently. How you recover from your surgery can depend on your age and overall health.

A nurse will give you the information you need to care for yourself at home. You may be given a handout on the Telehomecare Remote Surgical Monitoring program on the day you leave the hospital. This program allows you to connect to a registered nurse after you go home. You will be given a follow up appointment to see your surgeon in 3 to 4 weeks.

After you go home

- Take acetaminophen (example: Tylenol) 650 mg by mouth every 4 hours and ibuprofen 600 mg by mouth every 6 hours to manage your discomfort/pain. You may need to do this for 2 to 3 days after your surgery. After this only take these medications when needed. Talk to your surgeon about other options. If you cannot use one or both of these medications,
- Your surgeon may give you a prescription for a stronger pain medication.
- Do not drive until you stop taking the pain medication the surgeon prescribed for you.
- Slowly return to your regular diet. This may take up to 3 weeks. Drink 6 to 8 cups (1 cup = 250ml) of fluids every day.
- You may need to take a stool softener or laxative if you are not having regular bowel movements (what is normal for you).
- You may go home with a urinary catheter. You will be given the information you need to manage it if this applies to you.

Follow the other instructions below for the type of vulvar surgery you had (see the box that has been checked for you by the nurse).

☐ Vulvectomy / Wide Local Excision

- Change your maxi pad or dressing if it becomes soaked with yellow/pink drainage. Call your surgeon if your maxi pad or dressing is soaked with blood.
- Remove your dressing the day after your surgery.
- Do not wear tight underwear or tight fitting clothes. You can use a maxi pad to protect your underwear. Change the maxi pad at least once a day.
- You have stitches. We will tell you if they need to be removed or will dissolve on their own.
- Have a sitz bath 2 to 3 times a day. You will receive instructions on how to do this.
- After you urinate or have a bowel movement, rinse the area with a water squirt bottle. Pat the area dry. Keep the incision as dry as possible.
- If your surgeon prescribed Flamazine cream for you, apply it to your incision 2 times a day as directed.

- Ask your surgeon how long you need to be off work after surgery.
- Everyone heals differently. You will slowly be able to do more activities as you feel better.
 - No lifting more than 15 lbs (6.8 kg) for 3 weeks.
 - No strenuous exercise (example: vacuuming, lawn mowing, golfing, swimming, weight lifting) for 3 to 6 weeks. Your doctor will tell you when its safe.
 - No sex or anything in your vagina for a minimum of 6 weeks. Your doctor will tell you when its safe.

☐ Lymphadenectomy (or lymph node dissection/biopsy)

- If you have a small drain(s) in your groin area, a visiting nurse will come to your home to help you manage it.
- Wash your groin area with water and mild soap. It is important to keep it clean and dry.

☐ LASER

- If you have a dressing, remove it the day after your surgery.
- Do not wear tight underwear or tight fitting clothes. You can use a maxi pad to protect your underwear. Change the maxi pad at least once a day.
- If your surgeon prescribed Flamazine cream for you, apply it to your laser treated area 2 times a day as directed.
- Ask your surgeon how long you need to be off work after your surgery. This is normally 1 to 3 days.
- You will slowly be able to do more activities as you feel better.

For questions or concerns

Call the nurse navigator at 905-576-8711 extension 32917 (between Monday to Friday from 8 am to 4 pm – except on holidays) if you have any of the symptoms below. Go to a walk-in clinic or the emergency department at the hospital closest to you after-hours or on weekends/holidays.

- Increasing amount of bleeding from your vagina
- Increasing amount of pain in your abdomen (belly)
- Nausea and/or vomiting
- No bowel movement or passing of gas for more than 24 hours
- A fever above 38.3° C/100.9°F at any time or above 38.0° C/100.4°F for more than an hour
- Extreme shaking and chills
- Redness or swelling of your incision
- A bad smelling discharge from your incision

Go to the emergency department at the hospital closest to you for any medical emergency.

Follow up appointment

- You will be given a follow up appointment to see your surgeon in 2 to 4 weeks (this may be different if you had a LASER procedure). Call the receptionist at your surgeon's office within 1 week after you go home if you did not receive this appointment.
- At this appointment, your surgeon will talk to you about your pathology results.
- You will go to the Durham Regional Cancer Centre (DRCC) or Colposcopy Clinic for this appointment. Bring your Ontario Health Card (OHIP) with you to this appointment.

Talk to a member of your healthcare team if you have questions or do not understand any information in this handout.

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