

White Paper: FemiLift, our 18 months experience

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Introduction

A frequent consultation by multiparous women of over 40 year of age is their sensation of vaginal laxitude. And as a consequence, they experience a poor sexual performance due to lower friction in their genital region.

The application of FemiLift with CO2 Laser on the vaginal wall, produce a retraction and reduction of its diameter improving friction which translates into a positive change on sexual performance. Moreover, production of collagen improves in the vaginal wall, increasing the traction on the labial complex - prepuccial gland -.

Materials & Method

We treated 158 patients, during the period between December 2012 and May 2014. We used a Pixel CO2 Laser (Alma Lasers, Israel) and FemiLift handpiece and software (Alma Lasers, Israel). This technology created a “fractionated beam” of 81 spots or “pixels” that are directed to the vaginal wall. This modality creates a thermal and ablative effect that acts in a synergic way on the tissues. This promotes better results in comparison with other methods or laser types. The applicator has a disposable part that helps on preventing cross contamination and also preserves areas of the anatomy that are prone to lesions and complications.

Procedure

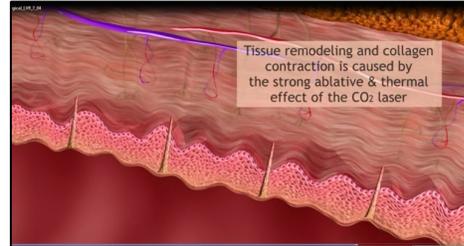
Patient is placed in the treatment room in gynaecological position. Area to be treated is cleaned to remove any excessive fluids. Insert the disposable FemiLift Handpiece into its sheath rotate to secure the attachment screw (fig. 1). Lubricate the handpiece sheath with lubrication oil. The surgeon and all persons inside the enclosed treatment room must wear appropriate eye protection. Set the initial energy level (startup set up recommendations: **High** mode, 40 mJ/pixel, according to the patient reaction you can increase up to 120 max , **Pulse** mode or repeat mode). We treated each side on 2 or 3 lines according to degree to retraction desired and length (distal to proximal) according to patients anatomy.

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Patients report no pain or mild discomfort in some cases during the treatment.



Figure 1: Femilift Handpiece



Results

We assessed results using the “FSFI”: Female Sexual Function Index, before and 60 days post treatment. The following results were obtained:

- 87% of patients reported a significant increased global score of excitation, satisfaction, lubrication and orgasm.
- 9% of patients reported a mild improvement of those domains.
- 4% of patients reported no changes.

Conclusion

In view of results obtained on a medium term and on a significant number of patients, we conclude that FemiLift is an effective treatment to tighten the vagina and rejuvenate its natural flexibility. This improves sexual life of patients with the advantages of a virtually pain free outpatient procedure that is easy to perform and presents low risks and a high degree of satisfaction.