

TATLER



OCTOBER £4.

**ARE YOU
SAFE ON A
SUPERYACHT?**
PROBABLY NOT

**MODERN
SWINGING**
The etiquette of
partner swapping

**WHO'S REALLY
IN CHARGE OF
THE DAILY MAIL**
THE MASTERMINDS OF
A MISSION TO CHANGE
THE STATUS QUO

**THE
SHEPHERD'S
PIE RULE**
This is important

YOU FLIRT

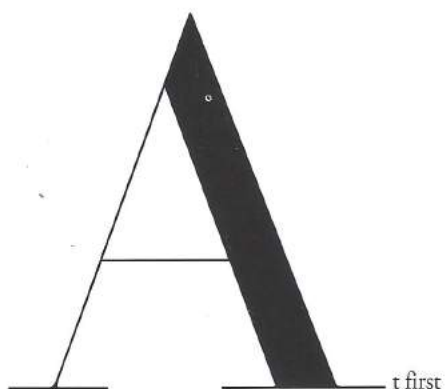
PAGES AND PAGES OF PERFECT PINK, THE COLOUR OF
THE SEASON, FEATURING FASHION STAR JOANNA HALPIN

**HOW TO IMPROVE
YOUR SEX LIFE**
It involves a magic wand



How to improve your self-confidence and your sex life

Candida Dare tries out some revolutionary and revelatory new procedures...



I thought it was a joke. 'Vaginal tightening'? 'Labial rejuvenation'? And then it dawned on me that, of course, aesthetic medicine – an industry that has brought us the vampire facelift, buttock lift and fat-freezing – was eventually going to find its way into our knickers.

Before you scream, this is not about surgery (although I will cover labiaplasty later). This is about a procedure that can both shrink and plump the inner and outer labia, as well as stimulate collagen production in the internal vaginal wall to combat 'laxity'. If you are asking why on earth anyone would do this, you are very young and have never had children.

I was told about the treatment in a whisper while I was having a facial at the Phi Clinic in Harley Street. I'm not even sure how it came up (it's certainly not in their literature). Maybe I asked what was new. 'Well,' said the nice therapist, 'I'm not sure how to broach this, but...' I greeted the concept as you might the idea of nostril-waxing – first with incredulity, then paranoia. Who is doing this? Why? Should I be? Why did no one tell me? Does it hurt? But talking to friends, I soon learned that news of this treatment has been spreading like wildfire – sotto voce, of course.

In France and Switzerland, looking after this area is a national concern. Hospitals offer treatment, advice and help on strengthening the pelvic floor, not least to guard against stress urinary incontinence (the horror of leakage when you sneeze, laugh, jump on a trampoline or join a conga). Here in the UK, women suffer in silence. According to Christopher Inglefield, a consultant cosmetic surgeon based in Harley Street, more than 50 per cent of women over 40 have stress urinary incontinence: 'The horrifying thing is that it's a huge problem and less than five per cent of women are treated on the NHS.' He blames a 'dismissive attitude' towards women in this country. 'It's the idea of, "You've had three kids – what do you expect?"'

All this before the hell of the menopause – dryness, vaginal atrophy, labia that look like 'deflated balloons' (Inglefield's words) and painful, chafing sex. Perhaps we should be celebrating the arrival of help for our vaginas, rather than covering our eyes and squeaking. So, in the interests of journalistic enquiry, I find myself, pants off, lying on a padded examination bed, with a nurse photographing my completely shaved – ahem – on her iPhone 6. Luckily, the nurse was unshockable (and she swore on her life she would not be laughing at the pictures in the pub later).

She has had her vagina treated, as have other nurses at Phi. Most are in their early-to-mid-30s, with no children, and two described the procedure as 'life-changing'. I am over 40, with two vigorous births under my belt, so to speak, and therefore what is described as the 'ideal profile'.

First I tried the Exilis Elite Intima (£1,500 for four sessions), a radio-frequency machine whose day job is shrinking and toning tummy skin to look 'bikini ready'. Switch the handset to a pen-like instrument, and it can be rolled up and down the labia, pumping

out radio-frequency waves until the area reaches 42°C. It's at this point, the nurse says, that 'the magic happens'. She gets to work: 10 minutes on each side of the labia majora, 10 minutes on the softer labia minora.

Once I had stopped writhing in agony from the scorching heat, we both admired how much my labia had shrunk. She took another photo so we could compare 'before' and 'after'. How can I describe this? The first was a large dark moth with its wingspan extended, the kind that would give you a fright as you turned on the bathroom light. The second was smaller, pinker, prettier. Certainly less suggestive of impending doom.

I underwent four of these treatments (they get more bearable), and now am in possession of a tighter, tidier, tinier and more 'tucked-in' little number. It's what you might call a 'designer vagina', and yes, it does make a difference to sex (more later). But it's not just appearance. Tight jeans don't cut. There's no 'camel toe'. I can feel the difference in the shower and see it when I pass a mirror in my exposed shaven state. There's a 65–75 per cent improvement in size and appearance. The whole area also feels more – well, alive.

Until then, having my labia shrunk was the weirdest experience I'd had. But then the nice people at Phi suggested I try the internal treatment: the ThermiVa. This is the Rolls-Royce of vaginal tightening, the machine extolled by the Kardashians (according to Khloé, 'in my household, all they do is talk about this vagina laser').

Actually, it's not technically a laser (although the job can be done with a laser), but radio frequency again. The nurse rolled in the machine, snapped on some gloves and pulled out a stick that looked like a ruler, which she proceeded to lube up with a bottle of ultrasound gel. ▷

◁ For this procedure a (female) doctor needs to examine you internally first to ensure there is no prolapse or tumours. The more sophisticated machine delivers the same heat as the Intima, but it's completely painless. Like the Intima, it treats both the labia majora and minora, but also inside, and therefore it is very intimate indeed. It's also more expensive at £3,000 for three sessions.

And it's super-weird: the practitioner must pass the 'ruler' in and out of your vagina, moving it up, down and around to ensure all sides are treated, while you chat away as if having a pedicure. Perhaps because it's painless, this was sort of OK. So OK that I found myself taking notes as the nurse plugged away. After 12 minutes, she could move the stick less easily because my vaginal canal was responding to the heat and contracting.

Dr Galyna Selezneva at Dr Rita Rakus has been using ThermiVa for a year – in response to the demand from patients – and was one of the first in London to offer the treatment. She says there has been huge uptake. 'For every woman I treat, four or five friends or family follow.' There's no downtime; you can resume 'normal activity', as Dr Selezneva puts it, 'immediately. And you should.' It's effective, efficient and lasts – although a top-up is recommended every year.

Patients' reasons for coming are manifold – some can't wear jeans, some can't do yoga because of 'noises', some have lost confidence 'and are avoiding a healthy sex life because they feel too lax'. Dieting also affects the area, Dr Selezneva says, since 'fat not only

WE SHOULD BE CELEBRATING THE ARRIVAL OF HELP FOR OUR VAGINAS, RATHER THAN COVERING OUR EYES AND SQUEAKING



disappears from your muffin top and abdomen – it also disappears from your labia.'

Satisfaction rates are 'very high', because women usually come with a 'concern', which they are able to address with great results. (One patient shrunk in 'tampon sizes'). Inglefield, who has been performing labiaplasty for 19 years, tells me another reason women consider it, which is rather distressing. 'Boyfriends and ex-boyfriends can be awful,' he says. 'It's usually at break-up. The boyfriend would make a nasty comment, like "I never liked your large labia." That happens a lot – maybe to 10–15 per cent of patients.' Those who ask for labiaplasty as a result he sends for psychological counselling.

Labiaplasty, incidentally, is a serious surgical procedure for women with abnormally large

labia. Inglefield tells me about a teenage patient who couldn't change into her PE kit at school because they were so visible: 'They were like pitta bread.' Her life was transformed by surgery. But it is not appropriate for purely cosmetic reasons and can be dangerous. 'I've seen patients who have had too much removed and it's very close to FGM [female genital mutilation],' he says. These he has to rebuild 'with a lot of difficulty'. Inglefield welcomes non-invasive procedures as an alternative. He's been using a CO₂ laser treatment for three years and prefers it to radio frequency: 'Because the penetration into the vaginal layers is better, you can get deeper heat into the collagen.'

While doing my 'research', I learned about other things you can have done. Not least 'G-shots' – collagen filler injected into the internal G-spot area to intensify orgasms – labial bleaching and even PRP (platelet-rich plasma), which 'stimulates the sexual area', according to Kambiz Golchin, who did the procedure for the first time recently. 'You inject around the clitoris and into the vaginal wall. It enhances the G-spot, yes, but it also helps with stress incontinence.' Five days later, his patient – a 43-year-old – reported having to go and buy a sex toy because she was feeling so aroused.

Meanwhile, I did road-test my pretty new vagina and I could definitely feel a difference. The lucky man said the labia reduction was most noticeable, but sex itself 'is more about the person you are with than anything else'. What a gentleman. □

OTHER THINGS THAT MIGHT HELP DOWN THERE...

BEST FOR... PLUMPING

Desirial at River Aesthetics
Dr Charlotte Woodward and Dr Victoria Manning use Desirial, a filler specially designed for the vaginal area. Injected internally, it helps to enhance the G-spot and prevent painful sex; there is also a version called Desirial Plus, which is injected via a cannula to plump the labia. Local anaesthetic is used at the point of injection, and the treatment takes under half an hour. Avoid baths, swimming, riding and sex for five days. Results last an average of six months. From £595 (riveraesthetics.com).

BEST FOR... TIGHTENING

FemiLift at HB Health of Knightsbridge
Dr Alexandros Bader helped to develop, and was the first to administer, FemiLift, which helps to improve vaginal contraction and control. A probe shoots laser energy into the vaginal wall, causing muscle tightening; the effects improve the feeling of sex, as well as urinary incontinence. No anaesthetic required, and there's no pain: a course of three sessions, four to six weeks apart, is suggested (as are Kegel exercises). From £4,500 for three sessions; annual top-up, from £1,500 (hbhealthofknightsbridge.co.uk).

BEST FOR... HYDRATION

MonaLisa Touch Laser Therapy at 25 Harley Street
Consultant gynaecological oncologist Miss Tania Adib uses fractional CO₂ laser to relieve dryness, discomfort and bladder infections. Laser energy, delivered via a cylindrical probe, causes micro-abrasions to the vaginal wall, enhancing collagen production and hydration; outer skin can be treated too, using a probe with a flat plate (anaesthetic is only needed for external treatment; the sensation is warm). Three sessions, four weeks apart, are recommended. £1,950 for three sessions; annual top-up, £700 (25harleystreet.co.uk).

BEST FOR... STRENGTHENING

vSculpt
The first at-home device for improving laxity and a weak pelvic floor, vSculpt works by combining heat, therapeutic light and sonic vibration. Used internally (it comes with a water-based hyaluronic-acid gel) for 10 minutes, every day, it promises to increase elasticity, blood flow and muscle strength in six to eight weeks. 82 per cent of users reported an increase in pelvic-floor muscle strength after use; 95 per cent noticed an improvement in overall tightness. From £375 (vsulpt.com).