

SELF ADVOCACY IN HEALTHCARE

PAIN MANAGEMENT FOR PRE-SURGICAL HAIR REMOVAL

This document describes the different pain management options that may be helpful during pre-surgical hair removal treatments, gives tips on how to speak with your primary care provider, and suggests what to do if you are having trouble finishing your hair removal or no longer want to continue with it.

Speak with your primary care provider to find the safest and most effective pain management plan for you. It may take a few tries to find the right combination. You may need more pain management options at the beginning when you have more hair. You may be able to use fewer options when you have less hair.

Phalloplasty with urethral lengthening: Hair removal by electrolysis to the urethral donor site is required. This is because there are serious risks of complications with hair growth in the new urethra.

Vaginoplasty: Hair removal in the genital area is recommended, and in some cases, required. This is because it can reduce the chances of having complications related to hair growth inside the vagina. There are different types of permanent hair removal: laser and electrolysis. The type of hair removal that will be used is determined on an individual basis (laser, electrolysis or a combination of both). For some people, the hair removal process can be painful and fortunately there are ways to help reduce the pain.

Pain management options

The most effective way to manage pain is usually by using a combination of options. Speak with your primary care provider or pharmacist to learn how to get maximum pain relief and to make sure you are taking doses and medicines that are safe for you. Here are some options:

Non-pharmacological tools	These are ways to treat or manage pain without medication. This can include using distraction, conversation, stress balls, music or virtual reality sets.
A combined hair removal approach	If appropriate for your hair type, you may be able to start with laser to clear most of the hair and finish with electrolysis.
Non-prescription pain medications	These are medicines that can be taken by mouth, and include medications like acetaminophen and ibuprofen.

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(pain management options continued from page 1)

<p>Topical analgesia</p>	<p>These are medicines that are applied to the skin.</p> <p>Non-prescription:</p> <ul style="list-style-type: none"> ▼ Trans Care BC provides a few compounded & commercial options for free. Learn more here or speak to your contact at Trans Care BC. ▼ You can purchase other products online, in pharmacies or from hair removal providers. <p>Prescription:</p> <ul style="list-style-type: none"> ▼ Your primary care provider can prescribe higher strength and different medication combinations for compounding. This is a personal expense and can be costly. Call the compounding pharmacy for an estimate before buying it.
<p>Prescription pain medications</p>	<p>These are medicines that can be taken by mouth and are prescribed by a primary care provider.</p>
<p>Intradermal freezing</p>	<p>These are medicines that are injected into the skin. They can be:</p> <ul style="list-style-type: none"> ▼ provided by primary care provider (not all providers can offer this). ▼ provided by a nurse at the hair removal location (this is a personal expense and not available at all locations).

If you are having trouble with the hair removal process

Phalloplasty with urethral lengthening: Most individuals are able to complete their pre-surgical hair removal. If you have started the process and are having difficulty finishing it, speak with your hair removal contact at Trans Care BC.

Vaginoplasty: While it is recommended, the Gender Surgery Program BC does not require pre-surgical hair removal for vaginoplasty (in most cases). If you have started the process of hair removal and are having difficulty finishing it, or no longer want to continue, speak with your hair removal contact at Trans Care BC.

Your surgical team will support you with a plan to move forward with your surgery. This will include a conversation about intra-operative hair removal (hair removal done during your surgery), which is a standard part of vaginoplasty surgery. It is done by manual cautery and significantly reduces future hair growth inside the vagina.

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Tips for speaking with your primary care provider

- ▼ **Book an appointment** to speak about pain management (avoid adding it on to an appointment where you have other things to talk about).
- ▼ Share the details:
 - ▽ Your surgeon has recommended permanent hair removal before surgery to reduce the chances of developing complications related to hair growth after surgery.
 - ▽ This process can involve long hair removal appointments that can be hard to tolerate without good pain management.
 - ▽ Combining different kinds of pain management options, including freezing the skin with an injection, can help patients complete their recommended hair removal treatments.
- ▼ If you have already started getting hair removal, share the pain management options you have used (if any).
- ▼ Ask what pain management approach they think may be best to start with or try next.
- ▼ Ask if they may be able to provide intradermal freezing before your hair removal appointments.
 - ▽ If yes, ask what the next steps could be after this appointment (ex: book another appointment to discuss further, book an appointment to start treatment)
- ▼ Share the document: “Permanent hair removal in preparation for gender-affirming surgery: Summary for primary care providers”

For vaginoplasty patients: While your clinician may have experience providing intradermal freezing, it may be new for them to provide it in the genital area and they may need a bit of time to learn about or plan it. This means that you may need to wait a bit to get started while they figure out the details.

If you cannot access intradermal freezing

Not all primary care providers will be able to offer this treatment. Here are some ideas for what you can do:

- ▼ Ask your primary care provider if they can refer you to a colleague for this treatment.
- ▼ Ask your hair removal provider if they work with a nurse that may provide this treatment (at an additional cost that you would need to cover).
- ▼ Ask your primary care provider to help you maximize the benefit of the other options above.