

Should a Psychiatrist Give Legal Advice on Cosmetic Genital Surgery?

Susan Bewley

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The UK Female Genital Mutilation (FGM) Act 2003 states that “A person is guilty of an offence if he excises, infibulates or otherwise mutilates the whole or any part of a girl’s [or woman’s] labia majora, labia minora or clitoris.” In a case report about a woman undergoing clitoridectomy following a previous unsatisfactory cosmetic labiaplasty, Veale and Daniels (2012) noted that “Anatomically, there is little to distinguish FGM from some of the procedures involved in carrying out legitimate surgery.” This is correct, but begs the question as to who decides the legitimacy of such surgery.

The Act states that “no offence is committed by an approved person who performs a surgical operation on a girl which is necessary for her physical or mental health” but also that “...it is immaterial whether she or any other person believes that the operation is required as a matter of custom or ritual.” Is cosmetic surgery as performed in clinics such as Restore UK (<http://www.gynecosmetics.com/>) really necessary for mental health or are we witnessing the emergence of new culturally determined customs and rituals? More pertinently, will patient consent protect surgeons from criticism?

Veale and Daniels (2012) stated that “The role of the mental health specialist is to assess and advise the surgeon on the wisdom and legitimacy of carrying out the proposed procedure.” Veale remained “very uncomfortable” about advising a go-ahead (presumably thinking it unwise). He admits that

perhaps he should have spoken to the husband or obtained an ethical opinion (Veale, 2012). He does not state whether he had any conflict of interest with respect to payment for the consultation or whether he took legal advice. Nevertheless, “The advice [he gave] to her surgeon was that a clitoridectomy could be exempted from the Female Genital Mutilation Act for cosmetic reasons. The rationale was that, if labiaplasty can be done for cosmetic reasons for perceived abnormality, then there was no reason that clitoridectomy could not be done on the same grounds” (Veale & Daniels, 2012, p. 728). This is simply wrong. Doctors do not decide legitimacy. It is a matter for the Courts.

Did the authors, reviewers or Editor consider contacting a Medical Defence Organization, the General Medical Council or the police? It seems rash to advise patients or publish articles regarding a potential serious criminal offence without properly investigating the legality.

References

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S. Bewley (✉)
Division of Women’s Health KCL, Women’s Health Academic
Centre, King’s Health Partners (KHP), 10th Floor North Wing,
St. Thomas’ Hospital, Westminster Bridge Rd.,
London SE1 7EH, UK
e-mail: Susan.Bewley@kcl.ac.uk