

#356 Health and Social Implications of the Husband Stitch: a nonconsensual additional stitch after childbirth

UNIVERSITY OF MIAMI
MILLER SCHOOL
of MEDICINE



Kessous H^{1*}, Souroujon A², Vilchez S³, Wein A¹, Amin K¹, Fein L¹, Syan R¹

1. University of Miami, Leonard M. Miller School of Medicine 2. Universidad Anahuac Mexico
3. Universidad Autonoma de Guadalajara * Presenter contact: hsk71@miami.edu

BACKGROUND

- The “Husband Stitch” is the name given to an additional suture or series of sutures placed when repairing a vaginal laceration or episiotomy after childbirth, often with the purpose of tightening the vaginal introitus for the male partner’s sexual pleasure.¹
- While repair of a tear or cut in the perineum may be medically necessary, an extra stitch, or “Husband Stitch” has no documented medical benefit to the patient.
- Women have spoken out in online media about undergoing this procedure without their consent and the health complications they have faced, including vulvar and vaginal pain, scarring, dyspareunia, and trauma.^{2,3}
- Roughly 85% of births result in vaginal lacerations or episiotomy, leaving many women vulnerable to undergoing the “Husband Stitch.”⁴
- The “Husband Stitch” could be considered a form of female genital mutilation/cutting (FGM/C), which the World Health Organization defines as “all procedures that involve partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons.”⁵

OBJECTIVES

- Despite robust anecdotal evidence, there is a paucity of research on the “Husband Stitch,” particularly on the patient’s perspective. The goal of this study is to advance knowledge about this practice and elucidate experiences, health impacts, and social implications of undergoing this procedure.

METHODS

- Ongoing data collection includes IRB-approved, semi-structured interviews with individuals 18 years or older who self-identify as having undergone the Husband Stitch without their consent.
- Participants are recruited from community forums for mothers, parenting classes and associations, and women’s health centers using a short questionnaire to determine eligibility.
- Interview questions were developed to address gaps in knowledge of the “Husband Stitch.” The interview script is divided into three sections: 1) the participant’s memory of the Husband Stitch, 2) their perception of the procedure they underwent, and 3) the health and social impact of the Husband Stitch.
- Interview transcripts were coded by two coders in NVivo. Cohen’s Kappa for independent coding was calculated and then recalculated upon negotiated agreement to reconcile differences, resulting in an increase from 0.23 to 0.93

Demographics (frequency)

Location “Husband Stitch” occurred	Alaska, USA (2) Florida, USA (1) Wisconsin, USA (1) New York, USA (1) Yamagata, Japan (1)
Year “Husband Stitch” occurred	1992 (1) 2006 (1) 2008 (1) 2011 (1) 2013 (1) 2015 (1)
Participant age at time of “Husband Stitch”	23 (1) 27 (2) 35 (1) 37 (1)
Number of pregnancies patient had prior to the “Husband Stitch”	0 (3) 1 (2) 2 (1)
Vaginal Laceration or Episiotomy	Tear (4)

RESULTS

PATIENT HISTORIES

How does the patient know?

- The doctor told the patient or patient’s significant other
- Medical sequelae

Did the patient consent?

All participants asserted that there was no consent process

Patient Perceptions

- All are opposed to continuation
- Comparison of their experience to “genital mutilation”
- Believe the “Husband Stitch” was performed as a favor to the patient, for their husband’s sexual pleasure, or tradition/culture

- “She [the delivery provider] turned to him and said ‘I’ll just do another stitch for you, Dad.’”
- “He [the delivery provider] started a repair and was telling me ‘I’m going to stitch this up in a way that your husband is going to appreciate.’”

- “At no point in time did they ask me if I wanted any extra stitching, and in no point in time did they ask my husband.”
- “Nobody asked, nobody informed me, no one gave me the impression that that was even a possibility of what would have happened.”

HEALTH AND SOCIAL IMPACT

Medical Impact

- Dyspareunia
- Decreased libido
- Short-term severe pain in the area of the repair
- Mental health sequelae
- Vaginal infection

Social Impact

- Distrust of physicians
- Distrust of men
- Gratitude toward supportive husband
- Resentment toward unsupportive husband
- Discomfort sharing their experience with friends/family
- Empowerment through sharing their story with friends and online

Recovery and Treatment

- Discomfort seeking treatment
- Told that nothing could be done
- Dyspareunia resolved completely after healing from a vaginal tear in a subsequent delivery

- “I think it’s a violation of my person.”
- “I am ashamed this happened to me.”
- “It’s still a problem, and it will always be a problem for me.”

CONCLUSIONS

- This study reveals that the nonconsensual “Husband Stitch” has been performed in the United States and Japan as recently as 2015.
- Nonconsensual practice of the “Husband Stitch” is an understudied practice that is medically unnecessary and associated with negative health consequences, including dyspareunia, concern for mental health sequelae, and social isolation.
- There is a lack of treatment options and accessibility for women experiencing medical consequences from the “Husband Stitch.”
- Data collection is ongoing to better study these implications in a larger population.
- Future studies will assess perception and beliefs of healthcare providers towards the “Husband Stitch.”

References

- Braun V, Kitzinger C. The perfectible vagina: Size matters. *Cult Health Sex*. 2001;3(3):263-277. doi:10.1080/13691050152484704
- Murphy C. Why the ‘Husband Stitch’ Isn’t Just a Horrifying Childbirth Myth. *Healthline*. Published October 5, 2023. Accessed February 5, 2024. <https://www.healthline.com/health-news/husband-stitch-is-not-just-myth>
- Reilly K. Is ‘the husband stitch’ a medical myth? Women speak out about their experience. *Yahoo Life*. Published February 2021. Accessed February 2023. Available from: <https://www.yahoo.com/lifestyle/what-is-the-husband-stitch-episiotomies-130009654.html>
- Jiang H, Qian X, Carroli G, Garner P. Selective versus routine use of episiotomy for vaginal birth. *Cochrane Database Syst Rev*. 2017;(2):CD000081. doi:10.1002/14651858.CD000081.pub3. Accessed January 31, 2024.
- World Health Organization. Female genital mutilation: Fact sheet. Published February 5, 2024. Accessed February 5, 2024. Available from: <https://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation>.