THE “G-SPOT” IS NOT A STRUCTURE EVIDENT ON MACROSCOPIC ANATOMIC DISSECTION OF THE VAGINAL WALL.

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Introduction

• 1950- Gräfenberg described an “erotic zone...along the anterior wall of the vagina”

• 1981- “G-spot” coined by Addiego et al.
  – “a firm 2 x 1.5cm area anterior to the urethra... associated with pleasurable sensation... enlargement by 50% size upon stimulation...”
“You’ll know you found it because it will feel like a bean-shaped bump and may be more textured than the surrounding tissue,” she adds.

three well-lubed fingers palm-up, about two inches in. Feel around for that rough patch, which can be "as small as your pinky fingernail or as large as a half-dollar," says Fulbright.

vagina with your palm facing up. Your G-spot is on the top wall of your vagina halfway between your vaginal opening and cervix. The spot should feel a little rough, almost like the surface of a walnut.
Introduction

• Controversy exists about existence of an anatomic “G-spot”.

• Aims:
  • Document gross anatomic detail of anterior vaginal wall.
  • To clarify whether an anatomic structure consistent with “G-spot” is reliably present.
Methods

- Systematic anatomic dissections on 13 female cadavers (8 fixed, 5 fresh).
- Age 32-97 yrs
- Digital photography to document anatomy of anterior vaginal wall.
Methods

• Cadavers transected to isolate pelvis.
• Partial Cystectomy/Hysterectomy performed (sparing bladder base/cervix/vault).
• Colon, small bowel, sacrum, rectum removed.
• Posterior vaginal wall removed.
• Tissue lateral to vulva removed.
• Posterior approach taken to preserve anterior vaginal wall for dissection.
Results

- No tumescent tissue noted along the ant. vaginal wall
- Deep to epithelium is urethra/bladder neck
- Posterior urethral wall had no macroscopic tumescent tissue.
• Ant. Vaginal wall is muscular structure covered w rugated epithelium.
• Anterior urethra abuts clitoris.
• Prominent veins.
• Bulbar tissue laterally.
• Lateral wall veins.
• Note close proximity of bulbar tissue to urethral meatus.
Conclusions

• No anatomic entity consistent with the putative “G-spot” was demonstrated.

• We have attempted to document anterior vaginal wall anatomy in a systematic, accessible, objective way.

• More likely that vaginal wall is abundantly innervated, in proximity to clitoris/urethra

• Detailed histologic studies underway