

SHOE BOOM

THE CULT
COBBLERS
CAUSING
HEEL MANIA

**WHO'S GOT
GLAMOUR?**

SIMON DOONAN
SIZES UP THE
PRETTY PEOPLE

DR SEX

THE PLASTIC
SURGEON
CHANGING THE
SHAPE OF 'DOWN
THERE'

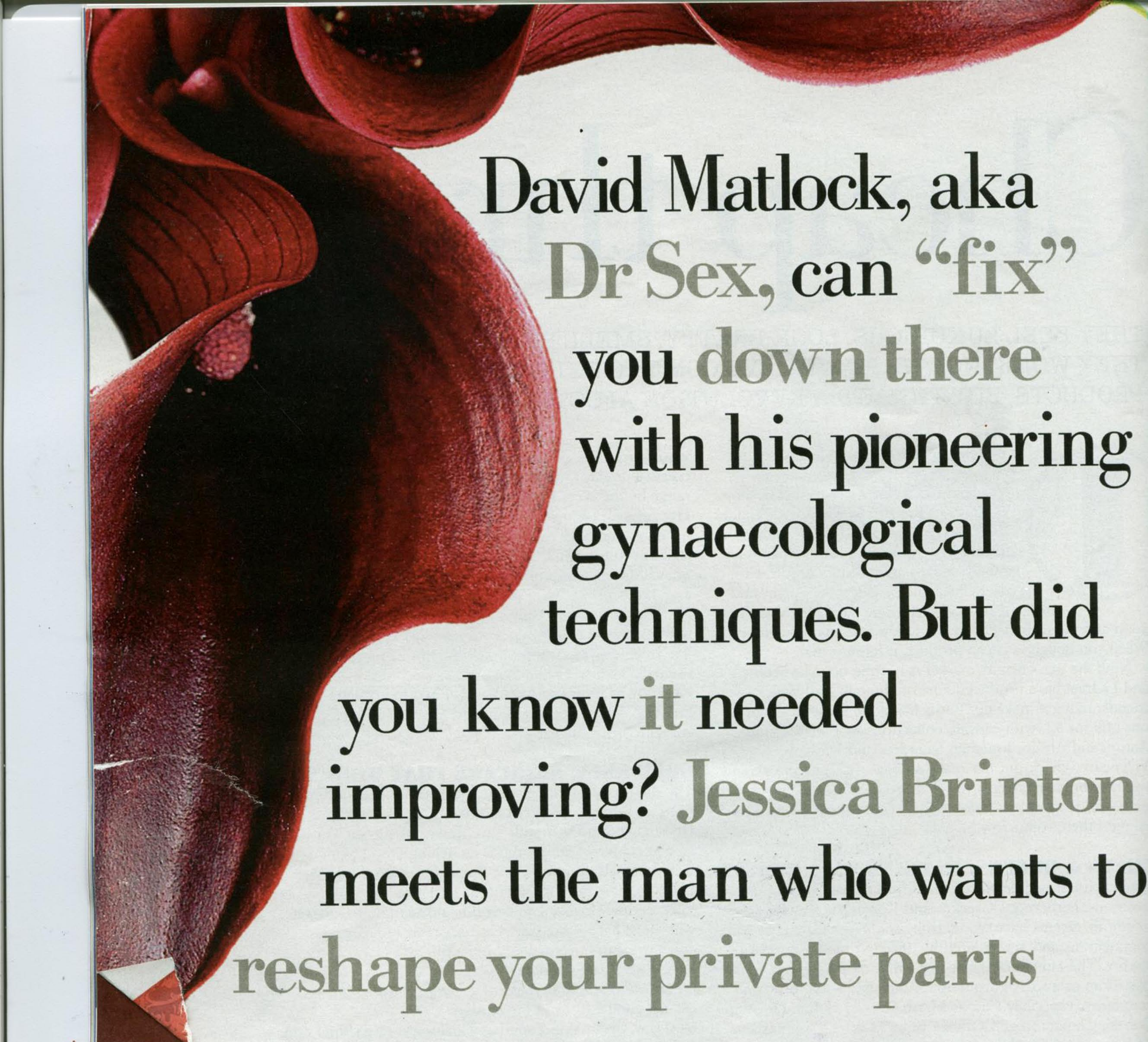
the entertainer

IT GIRL, ACTRESS AND DAUGHTER OF RAY,
JAIME WINSTONE TAKES CENTRE STAGE

style

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David Matlock, aka Dr Sex, can “fix” you down there with his pioneering gynaecological techniques. But did you know it needed improving? Jessica Brinton meets the man who wants to reshape your private parts

It's 7am in an office in West Hollywood, LA. On the horizon there is the delectable Pacific. Dr David Matlock doesn't want to talk about the scenery, though. He wants to talk about his work, which is proudly displayed in a series of ring binders. It is not my usual choice of pre-breakfast viewing. “Look at that – excess tissue along the clitoris. Now, see how clean and sleek that is. The minora: nice and neat.”

Indeed, the photographs leave nothing to the imagination. On we go with the salesman's patter. “I have procedures that I pioneered, trademarked and have developed over the past 12 years. Laser vaginal rejuvenation, for the enhancement of sexual gratification. Designer laser vaginoplasty, for the aesthetic enhancement of the vulva structures. I also do liposculpting.”

Yes, ladies, David Matlock, aka Dr Sex, can “fix” you. Didn't know you needed to be fixed? With the exception of more serious problems, it wasn't until the late 1990s that plastic surgeons seriously considered scouting for business “down there”. Yet from 2005 to 2006, according to the American Society of Plastic Surgeons, vaginal rejuvenation procedures in the States increased from 793 to 1,030 a year. Leading the charge towards this bold

new frontier in physical perfection-seeking is Matlock himself.

At 47, he has been in plastic surgery for 21 years, and in vaginal rejuvenation for 16. Today, he is a multimillionaire. Patients (or “customers”) from more than 30 countries arrive each week at his Laser Vaginal Rejuvenation Institute of Los Angeles, paying up to £41,000. A self-styled, can-do crusader for women, he sees his role as one of liberating women from the tyranny of sexual inadequacy and disappointment. By arming us with the tools for total physical dominion over our private parts, he is, to his mind, setting us free.

“My customers say, ‘You know what, I don't like the length of my labia minora. I don't want the small lips projecting outside the outer lips.’ We can take that excess skin away. They say, ‘I don't want my labia majora. They're too flat, I want them full.’ We can inject fat there. Or, ‘I've got too much fat in my mons pubis. It looks like I have a penis.’ And we can do that. Or, ‘I've had children, I'm too relaxed, I want intense sexual gratification’, so we tighten the muscle. Or, simply, ‘I just look too old.’ Because it's all about youth, youth, youth.”

These services add up to what he calls a “boutique cosmetic gynaecological laser surgery programme”, because customers will often have several at once. He does hymen repair, but doesn't talk about it since receiving death threats from religious groups.

His latest product is the G-Shot. This is when a quantity of collagen – the same stuff that goes into lips – is injected into the rough area inside the vagina that is supposed to constitute the G-spot. It costs £955 (£1,290 for a double hit), and lasts four months before being reabsorbed. Matlock also ships G-Shot kits to doctors all over the world.

Does it work? “Studies showed 87% claim heightened sexual pleasure.” In fact, this figure comes from a 2002 pilot study based on a 20-patient sample. No research on the G-Shot has been published in a peer-reviewed journal, but in the past few weeks, the British media has been all over the story. Professor Phaniel Dartey, a cosmetic gynaecologist based in Harley Street, has begun to offer the G-Shot over here.

Matlock himself is indefatigable in his enthusiasm for his inventions. I mention to him a recent report by a group of Italian scientists confirming that while the G-spot exists, it is not found in 15% of women.

“Hmm,” says Matlock, shaking his head. “I would say that every woman does have one. Reports like that ... it’s as if men want to take pleasure away from women.”

Why? “Because it’s a man’s world.”

And Matlock is very much a woman’s man. But is he really helping us out, or giving us one more area of our bodies to feel paranoid about?

“Look, demand for these treatments comes from women,” he says. “I didn’t create it, the market was there, and I discovered it because I listened to women. Every single one of the procedures has been developed because it has been requested. And it’s going international. There is demand.”

One or two customers a month travel from the UK to see him. Although the G-Shot is now available in this country, the British Association of Aesthetic Plastic Surgeons has no statistics on any form of vaginal plastic surgery in this country, simply because, as a press officer told me, “there isn’t a whole lot happening”.

Matlock thinks this is not through lack of need. “There is only one surgeon [Dartey] practising in the UK,” he says, with a hint of sadness. “I blame the national healthcare system you have over there. British doctors don’t earn enough to come here for training. Also, the mentality of the doctors – they work so hard, they have no life. Doctors here are entrepreneurial, in the first place. I make \$4m a year. I have a great life. I see patients twice a week, I do nine procedures. I don’t have night calls, hospitals, no weekends, none of that.”

It isn’t just the fault of the doctors. Some of the blame must also be laid at the feet of British women. Matlock is frustrated by the modesty of his British patients when it comes to that part of their anatomy. “My UK patients are so shy. They say, ‘Women in the UK would never talk about this.’ The attitude is, ‘That’s how it is. You were born like that, so leave it alone.’ That’s why they come here. Here, the culture is 100% different.”

Of course, the million-dollar question is, do his patients have better sex than anyone else? “Sexual gratification for women is directly related to muscles and tightness. Kegel,” he says, referring to pelvic-floor exercises, “we all know Kegel doesn’t work. So we ask, ‘How tight do you wanna be?’ What they say is, ‘We want to be as tight as we were when we were 18, before we had children.’

That’s what they want and that’s what they get.”

In fact, there are no studies to prove that the diameter of a woman’s vagina is the determining factor in her sexual pleasure.

Real-life testimonials, however, speak volumes. Violet Estrada, 37, who owns an LA property company, had laser vaginal rejuvenation to correct muscles loosened by the birth of two very large babies, a problem that had led to urinary incontinence and loss of sensation. She also had the G-Shot (and, while she was at it, Brazilian butt augmentation).

“I said I wanted to be like a 19-year-old. Then, when I went in for the rejuvenation operation, he told me about the G-Shot, and

I said, ‘Hey, I’m for it.’ The whole experience lifted my self-esteem. I felt tighter. My partner noticed right away. And the G-Shot was amazing. Even after one shot, it opens up your mind to what’s down there, puts you in touch with yourself.”

Back in Matlock’s office, we’re poring over pictures of a Playboy model displaying what he calls “a beautiful structure”.

Matlock’s hands-down bestseller is laser vaginal labioplasty, and it’s this kind of image, he claims, that inspires women. “Women bring in this pornographic information – I have drawers of it – and they say, ‘That is what I wanna see.’ That’s what women want to see after rejuvenation.”

Perhaps the Playboy bunny has been worked on as well? “Have I worked on Playboy women? Yeah, I have. I worked on one who was on the front cover.”

Where Matlock has fans, he also has outraged detractors, in his own industry and beyond. Dr Toby Mayer is a plastic surgeon working in Beverly Hills. “If someone has a functional problem with their vagina, then they should have reconstructive surgery,” he says. “But who can say what a vagina should look like? I am 66 years old. I have never, in all my life, ever heard a man say, ‘I saw this woman, she had an ugly vagina.’ Never. To tell someone otherwise is to promote body dysmorphia. What is the

mentality of this person? It’s not progressive, it’s entrepreneurial. It’s about money. And doctors should never be about the money.”

For Matlock, the link between good sex and pulchritudinous genitals is obvious. “It’s confidence. If you’re not comfortable with how you look, and you could correct it, why wouldn’t you?”

But do men care? Isn’t good sex a lot to do with feeling that someone likes you the way you are? A long pause. “No, I don’t think they care,” he says. “I think men are happy just to be there. A husband will usually tell a wife she’s fine, but she knows she’s not fine. She’ll say, ‘I know I’m not.’ He’ll say, ‘I think you’re fine, but if you want this, that’s fine.’”

Matlock has his own wish list. After 16 years of working out religiously, there is still a small bulge of fat on the top of his pectoral muscles. A Colombian surgeon has developed a technique for correcting it. “Why shouldn’t I want perfection if other people have it?” he says, looking out of the window at the blue sky and the light glancing off car windscreens as they crawl down Sunset Boulevard. “A perfect life – it’s all about that here. The guys, the girls, health and wellbeing. In every aspect of your life. Sexually, professionally, emotionally. Absolutely.” □

KEEP IT TIGHT

In the UK, we tend to accept a bit of bagginess and incontinence after children. We joke about sudden sneezes and the dangers of using the kids’ trampoline – we’re not pleased about it, but, hey, what can you expect after three or four kids?

In France, it’s different. It is the French woman’s duty to keep herself vaginally toned – however many children she’s had had. In fact, it is a matter of such importance that the government pays for women to have 10 sessions of pelvic floor-tightening physiotherapy after birth.

The high-tech option is EMG Biofeedback, in which a probe, wired to a computer, is inserted into the vagina. Sounds and visuals guide *madame* through an exercise programme. Those who don’t reach their “target performance” are referred for further sessions. EMG Biofeedback is now available privately in Britain; the equipment can also be bought on the internet.

It’s a shame British women can’t take advantage of similar physiotherapy sessions. Perhaps this is the real reason French women are so snooty: because they’re tighter than a gnat’s chuff, and don’t they just know it?

Amanda Lynch

