1	Response to Letter to the Editor regarding Anatomy, Histology and Nerve				
2	Density of the Clitoris and Associated Structures: Clinical Applications to				
3	Vulvar Surgery				
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This is the author's manuscript of the article published in final edited form as:

1 We appreciate the thoughtful comments given by Dr. Pin and Ms. Pin in their letter to

2 the editor regarding our article entitled 'Anatomy, histology, and nerve density of

3 clitoris and associated structures: clinical applications to vulvar surgery'<sup>1</sup>. Below are our

4 responses to each comment.

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The effects of androgens on the female external genitalia were beyond the scope of this descriptive study and no data were presented on this subject. In our Comment section, we do paraphrase a sentence from ACOG Committee Opinion No. 378 (reference 27 in original manuscript): "The American College of Obstetricians and Gynecologists recommends labial alteration procedures for medical indications such as repair of female genital cutting, treatment of labial hypertrophy or asymmetrical labial growth, chronic irritation, or excessive androgenic hormones." Since publication of our manuscript ACOG Committee Opinion No. 795<sup>2</sup> has replaced the aforementioned Committee Opinion.

The letter authors also comment about the skin and arteries of the clitoris. Review of sections of the clitoral body from our study specimens demonstrate that the deep arteries of the clitoris are located medially within the corpora, close to the midline septum, and not centrally, as depicted in our original schematic diagram in Figure 7. This relationship was clearly evident and consistently demonstrated. In many sections the deep arteries were noted to be surrounded by a cuff of dense fibroconnective tissue which was continuous with the septum, such that the arteries appeared to be located at the periphery of the septum in some sections, while in other sections there was a tiny strip of corpus cavernosum tissue located between the artery and the septum. Additionally, unlike the penis, the clitoris does not have circumferential skin; rather, the prepuce skin flares laterally, the ventral surface of the clitoral body being bounded by vestibular epithelium. These anatomic features are reflected in a revised schematic of our original Figure 7 (Figure 1), and in a new higher power photomicrograph of the clitoral body (Figure 2). Additionally, the dorsal vascular connection between the two corpora identified consistently in our study specimens is now illustrated in Figure 1, and shown clearly in Figure 2. This observation was discussed in Results section of our manuscript: "A connective tissue septum between the paired erectile tissue structures was noted during all gross dissections. Absence of this septum was noted at the 12 o'clock position in all histologic examinations."

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In response to the comments about clitoral glans length and width, we reported median, not average, values in this study as we assumed data would not be normally distributed, given total number of specimens examined was relatively small (n=22). However, median and mean for the glans width and length were the same. Our raw data for glans width and length is included in Table below.

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## 1 References:

- Jackson, LA, Hare AM, Carrick, KS, Ramirez, DMO, Hamner, JJ, Corton, MM. Anatomy of Clitoris and Associated Neurovascular Structures: Clinical Applications to Vulvar Surgery. Am J Obstet Gynecol. Am J Obstet Gynecol. 2019 Jun 26.
- Jun 26.
   ACOG Committee Opinion No. 795. Elective female genital cosmetic surgery.
   Obstet Gynecol. 2020 Jan;135(1):249-250

## Figure Legends:

## Figure 1. Body of clitoris cross-section

Schematic view through mid clitoral body. Note relationship of dorsal nerves and vessels of clitoris to corpora cavernosa and connective tissue layers surrounding corpora and of deep arteries of clitoris to septum of corpora caversona.

## Figure 2. Photomicrograph of mid clitoral body

Hematoxylin and eosin stained photomicrograph of mid clitoral body, 2x. Note deep arteries of clitoris (arrow heads) positioned adjacent to septum of corpora cavernosa (S), the surrounding cuff of dense fibroconnective tissue associated with each deep artery, and dorsal vascular connections between the two corpora, resulting in histologic appearance of an incomplete septum. *CC*, corpora cavernosa; *DNC*, dorsal nerve of clitoris; *TA*, tunica albuginea.

Table. Raw data for width and length of glans of clitoris in 22  $\frac{2}{3}$  unembalmed cadavers.

Glans of clitoris

	ı	Glalis of Cittoris		
Donor			Length	Width
Number	Age	BMI	(mm)	(mm)
1	65	18.9	9.5	4
2	65	24.2	8	4
3	70	27.2	10	6
4	78	29.6	9	4
5	65	25.8	11	4
6	61	19.7	7	3
7	69	16.8	10	3
8	88	20	7	4
9	71	17.7	8.5	5
10	64	19.5	11.5	4
11	89	27.5	6	4
12	70	27.5	6	4
13	58	34.3	7	4
14	64	26	9	4
15	48	17.2	6	3
16	83	18.3	6	3
17	76	22.9	9	4.5
18	74	18.2	4.5	3.5
19	66	20.1	10	10
20	83	29.3	7	4
21	71	24.3	7.5	4
22	74	13.3	8	4
Median	70	21.5	8	4
Mean	70.5	22.6	8.1	4.2



