

Hair removal—in this case, electrolysis—can be an invaluable service to trans people that can allow us to feel more comfortable in our bodies and/or prepare for surgery. However, electrolysis can also be daunting and confusing to research, plan around, and have sessions for. Many, rightfully so, have lots of questions going in. This zine attempts to elucidate some of the details of electrolysis in the hopes that other trans people, and those who support us, may feel more adequately prepared and properly informed about this often-difficult part of our transitions.

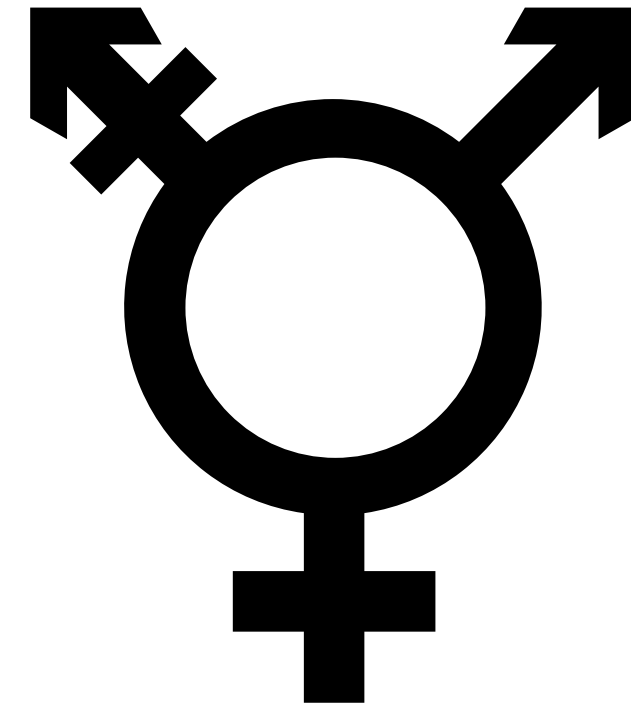
This text is authored by a trans woman who has undergone around 100 hours of electrolysis and has since gone on to become a licensed electrologist.



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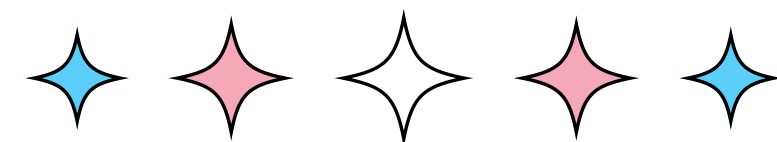
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A Trans Electrologist's Guide to Trans Electrolysis

General Advice on Body & Facial Hair
Removal, Preparing for Bottom Surgery
and My Personal Account



— anonymous

with others, you can find a digital copy at anchor.noblogs.org. There is also a printable version if you would like to produce and distribute this zine for yourself. All I ask of those who choose to print their own copies of my zine is that you distribute it for free, so this information is accessible and can be shared widely within our community.

Preface

To spare myself the annoyance of specifying when information I give applies primarily to electrolysis done on the genitals for the purpose of vaginoplasty preparation, I will be using an asterisk to indicate this specification throughout this zine. The presence of an asterisk does not necessarily mean that the information does not or cannot apply to electrolysis on other areas of the body, but rather that it is most significantly relevant to genital hair removal. For transmasculine folks, I will be including a brief section on pre-phalloplasty electrolysis as this zine is intended to be most useful to transfeminine people and trans women, or, more broadly, people who underwent a masculinizing puberty and are looking to reverse its effects.

The information in this zine will also be oriented to the United States, as that is where I currently reside and have personal experience.

To briefly contextualize my experiences with electrolysis: I have undergone around 100 hours of electrolysis on both my face and genitals. The majority of those hours were devoted to preparing for bottom surgery and were accumulated over a span of about two years. I have also performed around 10 hours of electrolysis on my own legs as part of my schooling as well as served clients all over the body. I have been treated by six different electrologists so far and a few of my trans classmates during our schooling.

Laser vs. Electrolysis

The primary difference between laser and electrolysis is the degree of permanence. It is important to note that electrolysis is the only FDA-recognized permanent form of hair removal, whereas laser is legally limited to being described as a method of permanent hair reduction. Laser can be ineffective or risky for those with blonde or red hair or darker skin, while the best candidate for laser hair removal is someone with a light complexion and dark brown or black hair. Electrolysis, however, can be performed safely on clients of any hair

type and color, and complexion. While laser can be performed more quickly across larger areas of one's body, the reliability of electrolysis' ability to destroy hair permanently balances out its slower speed. Lastly, in rare cases, laser treatment can end up stimulating dormant hair follicles to grow, accomplishing the opposite of what is intended.

For clients who match the ideal complexion and hair color combination (light and dark, respectively) suitable for laser, you may consider starting with laser for hair reduction and thinning and finishing the hair that remains after a handful of sessions of laser with electrolysis. Keep in mind that consistent treatment with laser can gradually remove the pigmentation from your hair, which may make it harder for an electrologist to see and treat the remaining hairs down the line. You should also understand that hair "removed" by laser treatment can potentially return months or years down the line.*

How Does Electrolysis Work?

Electrolysis works by inserting a fine needle, or probe, into each pre-existing hair follicle opening one-by-one and applying a short burst of current to damage the dermal papilla, which is the source of hair growth. The hair is then gently epilated, not plucked, from each follicle with tweezers.

Risks

Risks from electrolysis are largely dependent on the operator's precision, consistency, and understanding of their machine. The biggest and primary risk of electrolysis is usually considered to be scarring. However, this is generally a non-issue, regardless of skin color, unless the electrologist has the current intensity turned up far too high. If you are worried about your electrologist being inexperienced, don't be afraid to ask how long they have been in the practice or how frequently they perform electrolysis on the specific body part you want treated.

You also have to account for potential stoppage delays during each session because, as a client, you may flinch from the sensation of the current and need to take breaks due to pain. This is completely justified and you should not feel bad for needing to take breaks or twitching unintentionally. Just keep in mind that you need to be sitting or laying as consistently still as you can for the electrologist to be the most efficient with their time. For facial hair removal, any talking from the client during a session slows down the pace of treatment considerably.

Frequency of Sessions

Because electrolysis is so time consuming, you ideally want to attend sessions consistently to make progress efficiently. How often you schedule sessions is dependent on a few factors—namely how dense your hair is, how quickly it regrows, the location on the body, how well you can tolerate the pain, and your scheduled surgery date*. Relay your goals to your electrologist and ask them how long you should wait in between appointments.

Conclusion

I hope you found the information in this zine useful. I tried my best to avoid sharing information that a client will likely learn anyways in an electrolysis consultation. I wish anyone currently pursuing electrolysis the best of luck. I know it can be very frustrating and exhausting and sometimes it feels like it will never be over. I have been there. Try to remember why you are pursuing this in the first place. Hair removal, for the alleviation of dysphoria, surgery preparation, or aesthetics can be an act of self-actualization. Despite the pain this process may bring, the other side can be beautiful, peaceful, and joyful.

If you have any questions or would like to provide feedback on this zine, you can message me on instagram @anchor.distro or email me at anchor@autistici.org (slower response time). If you would like to share this zine

Post-Session and Healing

After a session, you may experience redness, itchiness, skin that is warm or hot to the touch, and, in some cases, scabbing. These are all within the range of normal skin reactions after electrolysis. Redness and irritation usually resolves within 24 hours. Scabbing, while uncommon, should resolve in about a week and they will fall off on their own.

Directly after a session, you can apply an ice pack to the treated area for 15 – 20 minutes. You can also use aloe vera to help soothe any lasting irritation. Gently rinse the area with witch hazel for the next day or two in the shower and wash gently with a sensitive soap.

It is important to completely refrain from tweezing or waxing between sessions. If you want to remove hair in the treated area before your next session, you should exclusively be shaving.

Emotional Ramifications of a Session

Electrolysis can put you in a really vulnerable and emotionally taxing mental state. Whether you are getting unwanted facial hair removed or preparing for bottom surgery, you are often forced to confront your transness and dysphoria in real time while potentially being in a lot of physical pain as well. It is important to practice self care and be gentle with yourself after a session.

General Timeline

Electrolysis takes a lot longer than you probably expect it to. It is, physiologically speaking, not something that can be rushed. Electrolysis is a meticulous form of hair removal that requires consistent precision, focus, and patience on the part of the technician. Both the client and the electrologist are beholden to the natural cycle of hair growth, which necessitates waiting for dormant hair to present itself before treatment can be done.

How to Find an Electrologist

For vaginoplasty preparation especially, try to find an electrologist you feel safe with. Of course, this is easier said than done. If your bottom dysphoria is unbearable, being naked around someone you barely know can be very uncomfortable, stressful, and emotionally draining. I have experienced this first hand. However, it is still possible to have an improved experience.

I would also recommend asking if your electrologist has done genital hair removal for bottom surgery preparation before. Since the genital region is arguably the most technically demanding area to perform electrolysis in, it is important to know how experienced your electrologist is. Most electrologists are far more comfortable working on facial hair than genital hair, as facial hair is generally the most commonly treated area and much of our training in school is done on clients desiring facial hair removal.

I would start by asking the trans people in your community if they have recommendations for electrologists. You may also want to ask your local LGBTQ center or trans support organizations for provider recommendations.

Multi-probe Electrolysis—Be Warned!

The first two electrolysis sessions I ever had was with an electrologist who uses a multi-probe machine. This means that, instead of treating hairs one by one with a single needle/probe, the technician instead inserts multiple probes into neighboring follicles one after another and then treats 16 hairs with electrical current simultaneously. This method, though largely obsolete and very rarely taught, performed, or offered by electrologists in the modern day, results in a tradeoff of efficiency at the expense of a much harsher and generally more painful experience for the client. As this was my very first introduction to genital electrolysis, my understanding of what electrolysis entails was quite skewed. While there are very few providers who still work with multi-probe electrolysis

in the US these days, I recommend avoiding these providers to start off if you happen to encounter one.

Insurance Coverage

While it is generally very difficult to get electrolysis covered by your insurance, it can be done in some cases. At one point, I saw an electrologist who worked under a bottom surgeon out of the urology and plastic surgery department at a university health center. The team at that clinic worked their magic with my insurance company and I was able to get electrolysis for bottom surgery prep through them for free for a while. Unfortunately, I was eventually told I would no longer be scheduled at their practice since, due to high demand and a long wait list for electrolysis, he was now only able to take on clients who scheduled vaginoplasty with the particular surgeon he worked under (I did not want to use said surgeon).

Sometimes, there are organizations devoted to providing trans healthcare that offer slightly cheaper electrolysis services in-house or contract with Medicaid or private insurance companies to get you covered. If your insurance does not cover the treatment up front, there may be a chance of reimbursement with superbills. If this is the case, check with your electrologist/their clinic staff to make sure they know how and are willing to provide superbills for you.

You might also consider asking your surgeon, hormone prescriber, or primary care doctor for a prescription and/or referral for electrolysis treatment due to medical necessity. This may require having a gender dysphoria diagnosis first, though.

How to Prepare for Your Appointment

Unfortunately, unlike laser hair removal, the client's hair needs to be present and visible to the electrologist in order to be treated. This means that, as the client, you need to refrain from shaving for a few days prior to your

electrolysis. You will regret having to reschedule your surgery for a later date because a certain patch of hair hasn't been reduced enough for your or your surgeon's operational comfort; I had to reschedule my surgery on two occasions because of this. It is probable that, had I rescheduled the surgery for a third time and pushed it back a few more months, I may not have had any hair regrowth post-op. At a certain point, though, I began to feel like bottom dysphoria was ruining my life on a daily basis, hindering the development of my sexuality, and preventing me from moving forward in other areas of my life.

On Electrolysis Pre-Phalloplasty

Electrolysis for the purpose of phalloplasty preparation is not nearly as intense as vaginoplasty preparation is. Electrolysis on the arms and legs is fairly tolerable for most people. In most cases, thermolysis will suffice as an adequate and efficient method for these hairs since they are less coarse than genital hair. I would still recommend using pain management options if you feel you need them. Advocate for yourself and take breaks if the position your body is in is uncomfortable or you are experiencing a lot of pain during your session. Do note that the density of hair on your leg or arm is likely higher than you realize, especially if your hair is curly. For best treatment effectiveness, I would recommend shaving the area before your appointments and allowing it to regrow to tweezer length as discussed earlier in the preparation section. Try to have a solid understanding of where the rectangle you want to use for the graft is located and be prepared to outline it during an appointment for your electrologist. An eyeliner pencil works well for this. Lastly, plan ahead relative to your surgery date and understand that you will likely need to spend 1 – 2 years getting all your hair removal done before your phalloplasty.

consequences, the knowledge that it was there in the first place was, at times, very upsetting to me and I had to get hair removal done during my revision surgery. I am still not entirely sure that all of the hair is gone after the revision.

The reason I tell you all of this is to demonstrate the potential consequence of improper or incomplete hair removal prior to vaginoplasty. Even still, it is worth acknowledging that bottom surgery will never be totally risk-free and there are many considerations each patient needs to make. Internal hair regrowth is simply one of those risks and you may value this risk more or less eminently than I did. (This article may be of use if you are interested in reading more about this phenomenon and its relevance to electrolysis:

razorfree.ca/entries/lgbtq-transgender/electrolysis-prior-to-srs.)

That being said, you ideally will want to have a general idea of which surgeon you are planning to schedule your bottom surgery with early on in your electrolysis progression. This is because each surgeon that requires electrolysis has a hair removal chart that they recommend the electrologist follow to ensure you are best prepared. The list of areas that the surgeon recommends hair removal for vary on personal preference and the vaginoplasty technique they will be using on you. If your surgeon provides you a chart, you will want to provide that chart to your electrologist so they can focus on prioritizing the removal of the right hair for your surgeon. If your surgeon tells you that they do not have a hair removal chart, or that the electrologist should know what to do, I would advise that you, at the very least, ask what areas they recommend be prioritized first.

The reason this is important to consider is because you don't want to waste time, money, stress, and potential trauma removing hair that isn't necessary for your procedure. Some hair can also be useful to hide the resulting scars if that is something you care about. Because of how long it takes on average to fully remove all the hair in the genital region and how debilitating bottom dysphoria can get as time goes on, you will want to make the most of your time for

appointment. The amount of time you should refrain from shaving varies from person to person, but the general rule is to make sure that the hairs grow long enough to be easily grabbed by tweezers. This is the perfect length, as the first stage of hair growth offers the best treatment outcomes; growing the hair out longer than tweezer-length may cause the treatment to be less effective as the hair matures and moves into a different stage of the hair growth cycle.

Needing to have hair present can understandably cause dysphoria for those seeking facial hair removal. After a session, you can feel free to shave as frequently as you wish until the next session comes around and you grow it out again. Avoid waxing or plucking, though.

You will also want to avoid wearing makeup, sunscreen, and thick moisturizers and creams on the area you are getting treated. Refer to the upcoming section on pain management for more advice on preparation.

What does it feel like to get electrolysis?

Sometimes, during an initial consultation, the electrologist might offer to treat a few hairs to show you how the treatment feels.

However, the intensity of the sensation can vary wildly depending on your level of hydration, hair thickness, location on the body, length of the session, treatment modality, and whether or not you employ any pain management options to prepare for the session. To better describe the various sensations you may experience, I think it is best to briefly discuss the three modalities of modern electrolysis. The most popular and fastest modality is thermolysis. This method uses a very short application of high frequency current in each follicle, which causes water molecules to speed up and generates heat. Thermolysis is most commonly associated with a sharp, hot, stinging, burning, poking, or pinch-like sensation for the client. The original and slowest method of electrolysis is known as galvanic and utilizes a direct current to produce a caustic chemical called lye in each follicle. Lye is naturally produced by the human body

and, when introduced to your hair follicles, results in the rapid decomposition of the source of hair growth. Pure galvanic electrolysis is not commonly employed by electrologists anymore but clients often report a sensation of tingling, shocking, or a ramping burning sensation. The final and more common modality combines both thermolysis and galvanic and is known as the blend method. Blend tends to feel like a combination of the sensations listed above but is faster than pure galvanic treatment because the added heat of thermolysis speeds up lye production.

When it comes to location on the body, the most uncomfortable areas tend to be the genitals, upper lip, armpits, nipples, and any place with thin skin directly above a bone (shins, knees, shoulder blades, etc.).

Session Length

Ideally, you will want your electrolysis session to be long enough to fully clear all of the actively present hairs in the area being targeted. So, for instance, if you want the hair under your chin, on your sideburns, and on your upper lip removed, a single session should encompass all of these areas and those three areas will be hairless when you walk out of the appointment. The reason I say this is the “ideal” approach is because hair growth works cyclically. This means that, at any given time, some of the hair follicles in your body are dormant and not growing hair. Often, when a client first begins electrolysis, little progress is seen after the first few sessions as hair always seems to regrow back in the same spot(s) soon after a session. This happens for two reasons: 1) the first time a hair is treated with electrolysis, there is *up to* a 60% chance to permanently destroy the hair if the operator’s technique is perfect. Each subsequent time the same hair follicle is treated, the hair structure becomes damaged further and the chance of permanent destruction increases and 2) some of the hairs you see popping “back up” after a session are hairs that your electrologist hasn’t even had the chance to treat yet since the follicles were dormant during your last visit.

surgery date, and stick it out. The complete numbness is absolutely worth the fleeting burning feeling of the injections.

Surgeon Requirements*

Surgeons have variable expectations for their vaginoplasty clients. Some surgeons are fine with solely laser hair removal, while most surgeons require partial or total electrolysis. Some surgeons treat pre-surgical hair removal as optional and even a few who ask that you don’t remove any hair at all prior to surgery. The latter is generally found by surgeons in Thailand who employ a slightly different vaginoplasty technique to those commonly found in the US.

The reason surgeons generally require some level of hair removal is because, since a large amount of your genital tissue gets inverted or flipped around, any unremoved hair prior to surgery can end up growing back on the inside of your vagina and potentially cause issues. Most vaginoplasty surgeons these days will do something called “follicle scraping” in the operating room, which is the process of cauterizing hair growing in **non-dormant/active** follicles in genital tissue before it is utilized for the neovagina. While a lot of surgeons often purport that this method is very effective for cleaning up the last few straggler hairs, having a more extensive understanding of hair growth can tell a different story. The truth is that follicle scraping is simply not a reliable method of total hair removal for vaginoplasty because any dormant follicles not actively growing hair will be missed during the scraping. This can result in hair growth inside the neovagina months down the line. So, by placing your faith in follicle scraping, you are essentially rolling the dice of hair regrowth and accepting the risk. As someone who had 1.5 – 2 years of consistent genital electrolysis and a surgeon who claims to have performed follicle scraping in the operating room (though admitted beforehand that she does not really believe in its effectiveness), I unfortunately still encountered a small amount of hair regrowth post-op. While this did not cause me any significant adverse health

Electrologists are sometimes open to trying different treatment modalities on you as well. If they start off with blend and you are very uncomfortable, switching to thermolysis may end up being far more tolerable. Don't be afraid to ask to try other modalities or settings.

Also of note: it's okay to not want to talk to your electrologist during a session! Some electrologists are chatty, either to pass the time, get to know you better, or try to keep your mind off of the pain. Establishing rapport with your electrologist can really help make the environment feel more safe for you as the client. It can at least slightly ease the tension inherent in presenting your magnified genitals under a bright light.* But sometimes it may just make the session more difficult as you are juggling keeping a conversation going with mentally withstanding the pain of the treatment. Don't be afraid to put earbuds in and close your eyes.

Lidocaine Injections*

If electrolysis is intolerable for you, you might consider looking into providers who offer lidocaine injections as part of their practice. These providers are hard to come by as this requires employing a nurse or a doctor whose license allows them to inject lidocaine. If this service is available at all it will likely be offered either by an endocrinology/HRT clinic that also offers electrolysis or through bottom surgeons who employ an in-house electrologist. While the lidocaine injection itself is quite painful upon administration (it produces a sharp, stabbing, burning pain), the area will be left completely numb to any electrolysis treatment for over an hour.

About halfway through my pre-op electrolysis progress, I wanted to give up and just take the risk of internal hair regrowth because of how much pain and trauma each electrolysis session was causing me. It wasn't until I found a local provider who offered lidocaine injections that I decided to keep going, delay my

Over time, the amount of hair in the treated area(s) will visibly begin to thin out. Patience is key here.

So, circling back to session length again: if all of the hair you want gone is not treated in a single session, some of the hair that was visible in that first session will shed and become dormant prior to the second session. This means that both you and your electrologist are missing a potential opportunity to treat an active hair if the session ends before a full clearance of the desired area.

This is tricky though.* A full clearance on dense facial hair may take multiple hours to get through and potentially increase the chance of scarring depending on the modality used. Whereas, a full clearance on coarse and dense genital hair may take as long as 6 – 8 hours. Longer sessions are harder to sit through as a client as eventually your body gets less capable of putting up with consistent instances of pain and your pain tolerance and mental fortitude will start to drop down considerably. Often, electrologists don't even offer sessions longer than two hours. However, some clinics who treat lots of clients for bottom surgery preparation may offer “marathon sessions” that are longer.

Pain Management

Before discussing this topic, it is important to note that electrolysis, for most people, is simply an uncomfortable process, especially on certain body parts with a lot of nerve endings. It is sometimes possible to completely negate any pain from the treatment but not always. Ideally, you should be shooting for a *tolerable* level of pain, not painlessness.* I think it is irresponsible to present electrolysis in a way that minimizes the painful component of it or shies away from mentioning pain entirely. One of my teachers once told me to use the word “discomfort” instead of “pain” when talking to a client; this left a very bad taste in my mouth. I have had my fair share of extremely painful experiences with electrolysis—some during sessions on my upper lip but primarily during sessions on my genitals. On a few occasions, I ended up in tears or I had to end an

appointment early. For this reason, I feel it is important to be forthright about this aspect of my profession and share everything I have learned about pain management techniques from firsthand experience with my readers.

Most people can safely take up to both 400mg ibuprofen and 1000mg acetaminophen before a session, but you should check with a doctor to ensure this is safe for you. Aside from oral painkillers, topical lidocaine can be extremely useful to electrolysis clients. You can readily obtain over-the-counter 5% lidocaine cream from your local pharmacy and it is not very expensive. I would recommend avoiding lidocaine sprays or any creams with additives like menthol. Apply the cream liberally around 30 – 45 minutes before your session, leaving a thick, goopy, visible layer of lidocaine on the area to be treated. You can further ensure the lidocaine's effectiveness by placing a piece of plastic wrap over the cream; this will keep the cream moist and allow it to be better absorbed into your skin. Your electrologist may even recommend keeping the plastic wrap on until the moment you sit down in their chair. If you try oral painkillers and lidocaine simultaneously and are still struggling with the level of pain you are experiencing, you might want to consider discussing prescription lidocaine of a higher strength than the OTC 5% with your doctor. (Electrologists do not have the qualifications to prescribe or dispense you medications.) You can also look into EMLA cream or BLT cream as opposed to straight lidocaine. Some of these products can be obtained online.

Pain from electrolysis sessions can induce high levels of anxiety and make your muscles tense up. You can try employing box breathing to reduce stress in the moment and potentially take the edge off.

You can also try experimenting with CBD and THC products before an appointment, but, speaking from personal experience, THC can sometimes amplify the painful sensations and make it harder to relax or manage your anxiety. That being said, if lidocaine and oral pain medication is not sufficient for you, it may be worth a try.

In the 24 – 48 hours leading up to your appointment, it is best to refrain from caffeine, which can increase your sensitivity to pain and dehydrate you, and alcohol, which can also dehydrate you. Ensuring that you are well-hydrated the day before and of your appointment can really help both the client's pain and the ease of treatment on the part of the electrologist. It helps by keeping your skin moist which may enable your electrologist to refrain from needing to turn the intensity of the machine up. Better hydration = more moisture in your skin = less current intensity required to heat up said moisture to the degree capable of damaging or destroying the source of hair growth inside of each follicle.

If the above recommendations are still not adequate for you and you cannot tolerate a full session of electrolysis, I would recommend looking into lidocaine injections*, evaluating your hair regrowth risk tolerance*, or potentially seeking out other, heavier prescription pain relief options. As a last resort, you could try seeking out an electrologist with a different machine to the one your current electrologist uses. Sometimes people fare better with certain machines compared to others.

Self-Advocacy as a Client Experiencing a Lot of Pain: Know Your Limits!

There are a few things you as a client can do during an appointment when you are having trouble tolerating the amount of pain during the treatment. The first and most simple thing you can do is ask your electrologist to take a break so you can have a moment to rest. Stand up slowly, use the bathroom if you need to, and get some water. You can also ask your electrologist to go a little bit slower between hairs. If you get to a point where you simply cannot take another minute of treatment, you can ask the electrologist if it would be ok to end the session early. Perhaps you would like to reschedule and try a different type of management option for the next time you come in.