

# CRYOSURGERY

## WHAT IS IT?

Cryosurgery is an office procedure most commonly used for treatment of chronic inflammatory changes of the cervix and abnormal PREcancerous lesions of the cervix. Occasionally, it may be helpful in the treatment of other lesions of the external female organs. The procedure literally means surgery by freezing and as the name implies, the abnormal cells are destroyed by freezing. The procedure is done with a cryosurgery unit which works on the same principle as a refrigerator, where gas flowing through a probe cools as it expands. The gas used is nitrous oxide and the temperatures reached are approximately minus 60-80° C. The action of the extreme cold on the cells is to cause a cellular disruption and a “cold burn” which would be very similar to a burn caused by heat. The advantage of the cold burn is that there is minimal to no discomfort with application.

## WHAT CAN BE EXPECTED DURING THE PROCEDURE?

How the unit works will be explained to you. Because of the nature of the gas used to cause the freezing, there will be occasional sounds of gas but no gas is released into the room air. The sounds will be demonstrated to you. You will be placed in the usual position for an internal female examination and the probe will be placed against the areas of abnormality in the cervix. Freezing will then be accomplished. During the actual freezing, a mild cramping sensation may be experienced, although many patients have no sensation at all during the procedure. The actual freezing will take no more than 3-5 minutes. After thawing of the probe, the procedure will be completed.

## WHAT CAN BE EXPECTED AFTER THE PROCEDURE?

The response of the body to the cold burn is very similar to that of a thermal burn in that a blister formation on the cervix is likely. This is the body’s normal response to such a stimulus. The blister formation will then normally break by itself, as often happens with a skin burn, and a drainage of clear fluid will follow. Therefore, you can expect a watery vaginal discharge for approximately 6 weeks after the procedure. Medication is not indicated for this, but if the discharge develops an odor or changes color, our office should be notified so that your doctor can prescribe medication. During the 6 weeks after the procedure, the use of tampons is not recommended, and sexual relations must be avoided to minimize the possibilities of infection.