CRYOSURGICAL CONIZATION OF THE CERVIX

This is an office procedure where, with the use of special equipment, a cone of the abnormal tissue in the cervix is frozen. This tissue gradually dissolves and the cervix heals in a much more normal manner than after cauterization, or knife conization. Usually only one cryosurgical conization is required. Occasionally patients may require two or more treatments to restore the cervix to normal. Afterwards the area will heal over smoothly.

Cryosurgical conization is used in the treatment of chronic cervicitis, endocervicitis, erosion nabothian cysts, and other precancerous changes found during a Pap test, Colposcopy or Endometrial biopsy. It is also used as a preventive measure to treat dysplasia. It is best performed 1 week after the end of the menstrual cycle. This allows the cervix to heal prior to the next menstrual cycle. Cryosurgery is not done if you are having your menstrual cycle or pregnant.

How do I prepare for Cryosurgery?
This is a simple procedure that is done in a short time in your provider’s office. You will not have to do anything to prepare for the procedure.

What Happens During the Procedure?
A speculum is inserted into the vagina. The refrigerant (nitrous oxide) is circulated through a special cryoprobe which is the area to be frozen. This focal freezing causes necrosis (frostbite) of the affected or discarded tissue, which then sloughs off. The remaining healthy tissue heals cleanly. Since a probe is used to freeze an area of the cervix, sudden movements can cause damage to normal tissues. You may feel a burning or cramping sensation while the area freezes and then thaws. Although the procedure may cause some discomfort, an anesthetic is rarely needed.

Risks Associated with Procedure:
If you are treated for a cervical lesion, during or after cryosurgery you may experience:

- Fainting
- Hot flashes
- Cramping in your lower abdomen
- bleeding
**What to expect:** After the treatment you will be asked to stay in the office 20 to 30 minutes after the procedure for observation of any symptoms as above. You can expect a rather heavy blood tinged watery discharge for about four weeks. This discharge is your body’s way of getting rid of the treated tissues. It is best to avoid sexual intercourse, douching, swimming, or tampons for 4 weeks because the cervix is friable. Occasionally women will have spotting or bleeding after she has intercourse, but this should not remain heavy. Showers are recommended.

**What to do:** Wear sanitary napkins to catch the discharge if necessary.

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**INSTRUCTIONS FOLLOWING CRYOSURGICAL CONIZATION**

1. You will have a heavy white watery discharge for 2-3 weeks.
2. Do not use Tampons or douche.
3. No sexual intercourse for 4 weeks
4. Use condoms for at least 2 weeks when resuming sexual intercourse
5. If there is no bleeding with first sexual intercourse, you may resume normal relations. If any bleeding occurs, wait an additional week before resuming sexual intercourse.
6. You will need a pap test in 4-6 months and every 4-6 months for one year after treatment.
7. If you have any problems or questions, please call the office as instructed.
8. Make an appointment for re-check two weeks after treatment.

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**When to call**

Contact the office if any of the following occurs after treatment:

1. Signs of infection, including fever and chills
2. Abdominal pain
3. Vaginal bleeding other than light spotting, especially if it saturates more than one pad per hour.
4. Any foul-smelling vaginal discharge.
5. Continued pain or cramping not relieved by over-the-counter medicines.

In case of an emergency, **call 911 IMMEDIATELY.**

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References:
Adapted from *Physicians Health Alliance, Cryosurgical Conization of the Cervix* (2012)
ThirdAge.com: *Health for Boomers and Beyond, Cervical Cryosurgery Concerns* (2012)
Image from *Planned Parenthood Federation of America, Cervical Cryotherapy* (2012)