Information for Patients

Cryocautery to the cervix

Welcome to the Gynaecology Services at Saint Mary’s Hospital

This leaflet aims to give you some general information about Cryocautery to the Cervix and help to answer any questions you may have.

It is intended only as a guide and there will be an opportunity for you to talk to your nurse and doctor about your care and treatment.

What is cryocautery?

Cryocautery involves temporarily freezing the cervix (the opening to the womb) with a metal probe for 1-2 minutes.

It is sometimes used to treat mildly abnormal cells on the cervix but more often used to treat excessive vaginal discharge or bleeding after sexual intercourse (post coital bleeding).

What causes my symptoms?

Post coital bleeding (bleeding after having sex) and excessive discharge are usually caused by a normal physiological process affecting the cervix where by the more delicate cells of the neck of the womb become exposed and roll out onto the surface of the cervix. This is called an ectropion or ectopy and is completely normal. These cells are more likely to bleed during sex or whilst taking a smear test (if you are old enough to have commenced the cervical screening programme). Their job is also to produce mucus to lubricate the vagina so if these cells are more exposed you may notice an increase in discharge.

Why do I need cryocautery?

Freezing this area on the cervix promotes the growth of the tougher, thicker tissue which is less likely to bleed during sex or produce excessive discharge. It is an effective, quick and simple method, and will not affect future fertility.
What happens during the procedure?

A speculum will be inserted into the vagina so that the cervix can be clearly seen. A cold metal probe will be placed onto the cervix for 1-2 minutes. The procedure may cause period type pains and these may last for the rest of the day. Approximately 1 in 3 women report having some pain after this type of treatment. Having pain seems to be more likely in women who haven’t had any children. Simple pain relieving medications such as Paracetamol or Ibuprofen usually help and it is recommended to take them prior to your appointment.

You are welcome to bring your partner or a friend with you.

What should I expect afterwards?

As no anaesthetic is required you can go home straight afterwards or as soon as you feel able. You can drive or take public transport.

It is normal to experience a heavy watery discharge for the first few days. This watery discharge may last for 2-4 weeks and may change from pink to brownish in colour. In order to minimise the risk of infection and other complications during the first 4 weeks you must:

- Use sanitary towels and not tampons.
- Avoid sexual intercourse.
- Avoid swimming.

You should contact the department where the treatment was performed or the Emergency Gynaecology Unit if you have any of the following:

- A smelly discharge.
- Fever or high temperature.
- Heavy vaginal bleeding.
- Severe abdominal pain.

Will I need a follow-up appointment?

It will be up to the clinician as to whether you need to be seen again in clinic and an appropriate appointment will be given to you. If your treatment is for abnormal cells it is very important that you attend any follow-up appointments made.
Contraception

We do not recommend this procedure if you are pregnant. You must therefore continue your contraception before and after this procedure.

Saint Mary’s Hospital contact numbers:

Should you require any additional information or help please contact:

Secretaries: (0161) 701 6922/276 6387 (8.30 am – 5.00 pm)

Nurse Colposcopists: (0161) 276 5485 (8.30 am - 5.00 pm)

For Trafford Hospital patients: (0161) 746 2260

Emergency Gynaecology unit contact number: (0161) 276 6204

Other Useful contact numbers and website addresses:

NHS Choices: www.nhs.co.uk

Cancel Research UK: http://www.cancerresearchuk.org/4-about-cancer