



## The Association of Minimally Invasive Gynecologic Surgeons

*...dedicated to safe, state-of-the-art surgery and health life-styles for women of all ages*

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### CRYOSURGERY OF THE CERVIX

We have recommended that you have cryotherapy (cryosurgery), a first line treatment for cervical dysplasia. This short pap is designed to answer any questions you may have about this simple procedure (also called cryosurgery) and to discuss treatment options.

Cryotherapy is performed in the office by your physician or nurse practitioner and involves freezing of the face of the cervix (opening to the womb).



Cervix

The area to be freezed is called the transformation zone. This area is prone to infection by the Human Papilloma Virus which can result in the formation of cervical dysplasia.

It is best to treat you soon after a period, instead of before or during.

The procedure will feel somewhat like getting a pap smear. A speculum is first inserted to isolate the cervix. Once the cervix is adequately visualized, a probe that is designed to fit onto your cervix is placed lightly onto your cervix, after which the freezing begins. The freezing takes 5 minutes and cause some cramping. It is best if you take advil 600 mg prior to the procedure. This cramping usually resolves quickly after the procedure. This procedure resolves dysplasia 80% of the time.

After your cryotherapy, you may notice a clear, watery discharge which may persist for as long as 4 weeks. This discharge represents the old, diseased cervical cells being discharged from the cervix and being replaced by newer healthy cells. Because this is the time of healing for the cervix, we recommend that you introduce nothing into the vagina until the watery discharge has stopped. This means no intercourse or tampon use during this time.

Though Cryotherapy is probably the most common therapy used in the treatment of cervical dysplasia, several treatment alternatives exist. First, there is laser therapy. With laser, an intense beam of extremely hot light is directed on the abnormal parts of the cervix in an attempt to destroy the dysplastic (abnormal cells). This is generally not available and can be performed with other modalities such as electricity. These therapies have the same cure rate as cryotherapy. Secondly, there is a procedure called a cone biopsy, where a segment of the cervix in the shape of a cone, is excised. It can be done in an outpatient surgery setting or in the office with local anesthesia. Cone biopsy has a resolution rate of 90% but is generally reserved for more severe dysplasia types. Lastly, we may choose to simply observe you for a certain length of time and repeating the Pap Smears and coloscopies (microscope evaluations of the cervix). In the case of mild dysplasia, 80-90% has shown self-resolution with healthy living.

Cervical Dysplasia, despite any treatment, may reoccur. It is important to continue 6 month follow-up visit with your doctor and to incorporate a healthy living program as part of your lifestyle.

[www.asccp.org](http://www.asccp.org) is the website for the National Organization that promotes the science and recommendations for treatments of cervical dysplasia. We recommend you explore this site to be better informed.