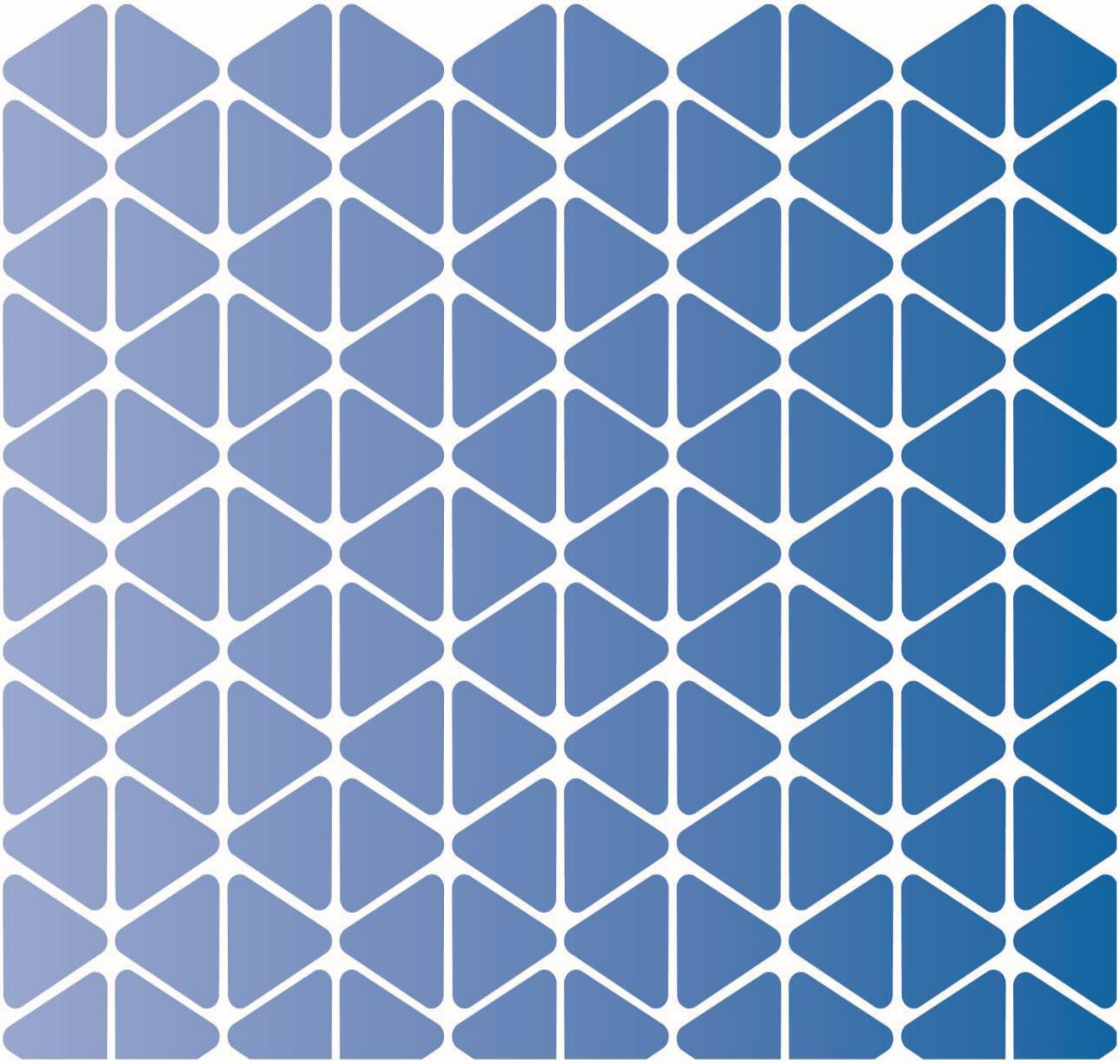
NHS
Worcestershire Acute Hospitals NHS Trust

PATIENT INFORMATION

CRYOCAUTERY TREATMENT TO THE CERVIX FOR CERVICAL ECTROPION



We hope that this information leaflet will help you to understand your care options. We hope that you will feel comfortable to ask questions of your health professional so that you can work together to make a plan that meets your needs and priorities.

Remember you can always ask the healthcare professional to explain things differently, explain things again, or to write down information for you.

Cervical Ectropion

What is Cervical Ectropion?

Cervical ectropion is where the cells that are usually on the inside of the cervical canal come out onto the surface of the cervix. This usually happens in response to hormonal changes, like starting the contraceptive pill. Cervical ectropion is not harmful, but can cause bleeding after sex, following a smear test. and increased vaginal discharge. The cervix may appear red as the cells are thinner and more delicate.

To tell whether or not you have cervical ectropion, a speculum is placed into your vagina so that the doctor can look at your cervix.

If the doctor finds cervical ectropion they will explain the process for treating it using Cyrocautery. Cryocautery encourages the growth of thicker tissue that is less likely to cause troublesome bleeding or produce excessive vaginal discharge. Before having cryocautery your doctor will need to make sure there is no infection or abnormality on the cervix. This involves swabs and occasionally a biopsy from the cervix. Your doctor will discuss this with you.

What is Cryocautery?

Cryocautery involves:

- Undressing from the waist down and lying on the couch.
- Placing a speculum into the vagina (similar to a smear test).
- A cold metal probe is then placed on the cervix for 1 – 2 minutes to freeze the cells.

You may feel some crampy period-like pain during the procedure and for a few hours afterwards. If you are not allergic to painkillers, we recommend taking paracetamol or ibuprofen before your appointment. Please follow the advice on the packaging.

You cannot have this treatment if you are pregnant. Please let your doctor know if you think you could be pregnant.

There is a risk that your procedure will be cancelled if there is a chance of very early pregnancy. In order to be sure you are not pregnant at the time of the procedure you must not have sex or you must use reliable contraception between the first day of the last NORMAL period to the date of procedure.

It is normal to have some pink, watery discharge after the procedure. This may then become brown in colour. This usually lasts for a couple of days but may last for a few weeks.

What are the risks of this treatment?
This is generally a very safe procedure and you are unlikely to have any problems.

The rare risks are:

- Infection, which can usually be treated with a course of antibiotics from your GP.
- Narrowing (stenosis) of the opening to the cervix.
- There is a small risk that the ectropion could reoccur.

Consent
We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves. If you would like more information about our consent process, please speak to a member of staff caring for you.

How can I prepare?
Eat, drink and take any medications as you normally would.

What happens after the procedure?
You should be able to travel home on your own and carry out all your normal daily activities. You may prefer to have someone with you and may wish to keep the rest of your day free. Avoid using tampons, swimming or sexual intercourse for four weeks.

Having read the above information, it might be helpful to think about the following…

- What do I want to ask my healthcare professional?
- What is worrying me about this procedure right now?
- What else is important in my life right now?
- Who is able to support me?
- Would I like someone to come with me to my appointment if possible? *There may be restrictions due to the Covid-19 pandemic.*

Notes

You can fill out the following table with your healthcare professional. This will help you to think about which option is best for you, given your individual situation. Doing nothing is also an option.

My Options include…	The Benefits Why is this option good for me?	The Risks What is not so good about this option for me?

You might also want to ask…

- Are there any activities that I need to avoid after the procedure?
- Is there anything that I can do to help myself?
- Where can I go to get more information?

Notes

Remember you can always ask the healthcare professional to explain things differently, explain things again, or to write down information for you.

Who should I contact if I have any problems?

You should seek advice by calling the Emergency Gynaecology Assessment Unit (EGAU) or your GP if you have any of the following symptoms:

- Smelly discharge
- Heavy vaginal bleeding
- Severe abdominal pain
- High temperature

If you have any questions the EGAU helpline is open 24 hours a day, 7 days a week. **If your symptoms get worse, please call your GP, 111, or 999.**

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.