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Conisation of the cervix under general anaesthesia

The purpose of this leaflet is to provide the patient with information on the purpose, nature and course of the surgical procedure, preparation for the procedure and recovery after the procedure.

Cervical conisation is a surgical treatment in which a conical piece of tissue is removed from the outer part of the cervix.

The purpose of conisation is to cut out the area of the cervix with altered cells. Cervical conisation is performed on patients with moderate to severe cervical dysplasia.

In the case of dysplasia, cell growth is impaired. In moderate dysplasia, changes include one-half to two-thirds of the surface epithelium of the cervix. In the case of severe dysplasia, the growth of whole surface epithelium cells is disrupted, but the altered cells do not penetrate deeper into the basal plate of the basal layer.

Before surgery

In order to avoid vomiting and prevent the acidic stomach contents from entering the lungs, you **must not eat for six hours** and **not drink for at least four hours prior to surgery** You should also **not smoke or chew gum.** If you have a chronic illness (e.g. arterial hypertension, asthma) and you have been prescribed treatment, take your daily medications the morning of the procedure. You are allowed to take a few sips of water to swallow the tablets. The only exceptions are diabetes medications, which are usually not taken without eating.

Empty your bladder before the surgery.

To reduce the risk of complications, please inform your doctor before the surgery:

- of your state of health, including all illnesses and medications you are taking regularly;
- if you have a pacemaker; and
- of your known allergies to medications.

Course of the surgery

The conisation of the cervix is performed by a gynaecologist and the surgery is performed under general anaesthesia.

The conical part of the cervix is removed with an electric loop or a scalpel. The removed tissue sample will be examined histologically.

Possible complications

Complications may occur during the surgery.

Possible complications include:

- allergic reactions to administered medications;
- bleeding that may occur immediately after conisation or up to one to two weeks later.

If an electric loop is used to perform the operation, the skin in the electrode area may be damaged. Electric vaginal ulcers can also occur on the vaginal mucosa and labia. A late complication in the form of a fistula may occur between the bladder and the vagina or between the vagina and the rectum.

The abovementioned complications are very rare.

Postoperative period

You will be in the hospital for a few hours after the surgery. Once you have recovered from anaesthesia and the venous cannula has been removed, you can leave the hospital. If your surgery was performed under general anaesthesia, you should not drive or perform any other activities requiring a rapid response on this day, as medications used for anaesthesia may slow down your reaction rate.

After conisation, the cervix heals within five weeks. There may be a small amount of bleeding and an unpleasant smelling discharge during this period. Here are some tips to help you get better:

- In those five weeks, it is forbidden to have sexual intercourse, take a bath or swim, as these activities can cause bleeding or inflammation.
- Physical exertion and exercise should be avoided for three weeks.
- It is not recommended to use tampons (even during menstruation) or vaginal balls for four to six weeks.

Postoperative bleeding is most common between the 6th and 14th day after surgery. Occasionally, mild lower abdominal pain may occur after conisation. Some patients experience numb pain in the lower abdomen on the first day after conisation.

Please note! If you develop heavy bleeding, a fever or severe lower abdominal pain, you should contact the Women's Clinic emergency on-call room at 18 Ravi St, Tallinn.

Unless you have been told otherwise, you can find out the results of the histological examination from your outpatient gynaecologist.

If you have any questions or need more information, please consult your doctor.

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