

Cone Biopsy

Patient Information

Obstetrics & Gynaecology Department



The Patient Information Leaflets page on the Trust website is available on the link:
<https://www.wwl.nhs.uk/patient-information-leaflets> or scan the QR code.

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Introduction

This leaflet aims to give you information about your operation, your stay in hospital and advice for when you go home.

If at any time during your stay on the ward you have any questions or worries, please feel free to speak to a member of staff.

Contacts for cancellation

If there is a need to cancel or postpone the operation, **please contact the Admissions Office as soon as possible** on: 01942 264848 or 01942 264843

What is a cone biopsy and why do I need one?

A cone biopsy is where a piece of tissue, shaped like a cone is removed from the cervix (neck of the womb).

Your smear will have shown abnormal cells when you attended a colposcopy clinic. These changes on your cervix can be effectively treated by a cone biopsy. Subsequent smears will depend on the results from the cone biopsy. You will be informed when your next smear will be due.

Benefits

The benefits of the procedure are:

- Larger part of the neck of the womb is removed (normally under general anaesthetic in theatre), thus chance of entirely removing the abnormality is better.
- Performing this procedure in theatre under anaesthetic allows additional safety.
- The removed part of the cervix will be sent to the laboratory to confirm that the abnormality was entirely removed.

Risks

- Bleeding and infection are known complications.
- Occasionally the surgeon might need to leave a pack (lengthy gauze) in the vagina and a catheter (fine rubber tube) in the urinary bladder for up to 24 hours. These will be removed before you are discharged home with minimal discomfort.
- Rarely top of the vagina might be cut and bowels and/or bladder traumatised.
- **Very rarely** bleeding could be heavy and hysterectomy (removing the womb and the neck of the womb) might become necessary.
- In the long-term a Cone Biopsy can weaken your cervix and put you at risk of miscarriage and premature labour or difficulty of the neck of the womb to open during labour. Also it can make obtaining adequate smears difficult.
- The cervix may narrow due to scarring (cervical stenosis). This may require further surgery to dilate (stretch) the cervical opening.

Alternatives

- LLETZ (Large Loop Excision of Transformation Zone) – removing abnormal area of the neck of the womb with heated loop of wire, under local anaesthetic or general anaesthetic.
- Hysterectomy – removing the womb and the neck of the womb (in operating theatre) under general anaesthetic.

The procedure

The procedure to remove the abnormal area from the cervix (neck of the womb) usually takes about 20 to 30 minutes. It is normally done under general anaesthetic in the operating theatre.

How should I prepare?

Do not stop taking contraceptive precautions before the operation. If you have any suspicions that you may be pregnant at the time of the operation, you should let the doctor or nursing staff know when you are admitted so that a pregnancy test can be carried out on the ward, however, we must point out that a negative pregnancy test does not exclude an early pregnancy.

Following the operation

If you have any queries or worries following your discharge do not hesitate to contact your GP or telephone the hospital on the numbers given at the end of this leaflet.

You may experience some slight bleeding or discharge for up to six weeks. If the bleeding is very heavy and you start to pass clots, or you have an offensive smelling discharge, please ring the ward for advice on one of the numbers at the end of this leaflet. Your next period should be at the normal time but may be heavier than usual.

- **Do not have** intercourse for 4 weeks.
- **Do not use** tampons for 4 weeks
- **Do not swim** or take baths for 4 weeks

Your follow-up appointment

Once we have the results, we will inform you of these and send you an appointment to attend the clinic or see your GP for further smears.

Please remember it is very important that you attend for your follow-up smears.

Contact information

If you have problems after your operation and wish to speak to someone by phone, you can ring one of the following telephone numbers:

Monday to Friday 9am until 4:30pm

Hanover Women's Healthcare Unit 01942 26495 or 01942 26460

Or (out of hours)

Swinley Ward, Royal Albert Edward Infirmary, Wigan. 01942 822568

Please use this space to write notes or reminders.

Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends, and carers.

Contact Us

Tel: 01942 822376 (Monday to Friday 9am until 4pm)

The Patient Relations/PALS Manager
Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust
Royal Albert Edward Infirmary
Wigan Lane
Wigan
WN1 2NN

Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

1. What are my options?
2. What are the positives and negatives of each option for me?
3. How do I get support to help me make a decision that is right for me?



How We Use Your Information

For details on how we collect, use, and store the information we hold about you, please see patient information leaflet, Ref. **Corp 006** How we use your information, this can be found on the Patient Information Leaflets page on the Trust website, see details on the front cover.

This leaflet is also available in audio, large print, Braille, and other languages upon request. For more information, please ask in the department/ward.

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