

Cryotherapy

Dermatology Medicine

This leaflet has been designed to give you important information about your condition / procedure, and to answer some common queries you may have.

Information for patients and visitors

Introduction

Cryotherapy means freezing with liquid nitrogen. The treatment is used to treat a wide variety of superficial lesions. It is commonly used to treat viral warts and verrucas and occasionally this treatment may be used to treat small skin cancers and areas of sun damaged skin.

Cryotherapy may be used from a canister like a flask as a spray or using a cotton bud dipped in liquid nitrogen.

Before Treatment

Cryotherapy treatment is usually painful because the liquid nitrogen is very cold and causes symptoms similar to holding onto frozen food from the freezer for long periods. We may therefore give an anesthetic cream to numb the skin to be treated beforehand. This is mostly used for children but can be given to adults. Otherwise there is no preparation for the treatment.

Warts and verrucas may be pared down with a scalpel before freezing. Lesions with crusting or scabbing will have this removed before treatment.

Treatment Times

Freezing time depends on what type of lesion is being treated. The time can vary from a few seconds to up to thirty seconds. Treatment may be given as one continuous spray or more. Viral warts and verrucas are usually given a longer freeze. The doctor or nurse will decide on your length of freezing time.

Frequency of Treatment

Some lesions need only one treatment but others such as warts and verrucas may need to be treated several times. Widespread areas of sun damaged skin may also require several treatments.

Warts and verrucas are normally treated every three weeks for optimum results.

Skin cancers and areas / lesions of sun damage may be treated at two to three monthly intervals. These lesions may need may require many months of treatment particularly if widespread.

Side Effects of Treatment

Cryotherapy will initially be painful. This discomfort usually lasts for five to ten minutes and then gradually improves but this varies from person to person. It is common for some swelling and redness of the skin to develop and this can last several days. Lesions that have been treated more intensively may develop a blister. This may be clear fluid or filled with blood. If the blister is tense and uncomfortable you can gently cleanse the area of skin and prick the blister with a sterile needle. A dressing can be applied.



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Lesions treated on the lower leg may take several weeks to heal as the blood supply to this area of the body is less brisk.

Very rarely particularly after prolonged treatments you may experience numbness to the area of skin treated.

You may also develop a lighter patch of skin where treatment has been carried out. This will be permanent. It is not possible to determine if this will occur after your treatment although it is more likely to happen after prolonged or aggressive treatment.

If the skin is raw, particularly after blisters burst it is advisable to apply an antiseptic ointment such as cetrimide and chlorhexidine gluconate to the area daily. Do not cover the area unless weeping to allow a scab to form. This process may take several days.

Benefits

The benefits of treatment are to treat any lesions. If the lesions are skin cancers or pre-cancerous lesions cryotherapy may prevent other more invasive treatments such as surgery.

Risks

The risks of treatment are as described above. The main risks are: loss of sensation to the areas of skin treated, this may be permanent. Loss of pigmentation / normal skin tone / lighter patch of skin where the treatment was carried out, this is usually permanent.

Having no treatment to any skin cancers or pre-cancerous lesions would mean that the cancer may become deeper or bigger over time. If you decided not to have cryotherapy or to continue with the treatment course recommended then you need to discuss alternative treatment (see below).

Alternatives

Alternative treatments to cryotherapy will need to be discussed with the doctor or nurse. They may include applying creams or surgery but this will depend on several factors that will need to be discussed with you first.

For Further Information

Dermatology Outpatients at Scunthorpe General Hospital (SGH), Diana Princess of Wales Hospital, Grimsby (DPOW) and Goole District Hospital (GDH):

03033 306542 choose option 4.

Reference Section

British Association of Dermatologists, London.

Patient Information Leaflet, Cryotherapy.



Information for patients and visitors

Patient Advice and Liaison Service (PALS)

The Patient Advice and Liaison Service offers confidential advice, support and information on any health related matters.

If you have a comment, concern, complaint or compliment about the care or service you have received from the Trust you can contact the PALS team as follows:

Telephone: 03033 306518

Email: nlg-tr.PALS@nhs.net

There are also offices at both the Diana Princess of Wales Hospital (near the main entrance) and Scunthorpe General Hospital (on the C Floor, near the outpatient department), should you wish to visit.

Please note: PALS should not be contacted for clinical advice relating to the content of this leaflet. The service should be contacted directly in the first instance.

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