AUDIT OF INDICATIONS FOR GA FOR LARGE LOOP EXCISION OF TRANSFORMATION ZONE (LLETZ) OF CERVIX
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Objective: To assess the indications for GA for LLETZ of Cervix and to compare it with the National Standards: To compare the punch biopsy results with LLETZ histology. Design: Retrospective study over 2004 and 2005. Population: Women who attended our colposcopic clinic with abnormal cytology over 2004 and 2005. Results: Total number of woman attended over the study period for LLETZ was 462. 53 of them (11.5 %) underwent LLETZ under GA. The mean age of women was 30 (Range 23 – 51). 40% of them were nulliparous and 60% were parous. The indications for GA were as follows: Anxiety in 41%, large lesion in 41%, large lesion and difficult access in 6%, anxiety and wart excision in 2%, anxiety and large lesion in 2%, risk of invasion, large lesion and repeat treatment in 1%. Consultants made the decision for GA in 45% of patients and by staff grade in 51%. Cervical Intraepithelial Neoplasia (CIN) severity grading was similar in LLETZ histology and in punch biopsy in 64%. LLETZ histology showed higher grading in 17% and lower grading in 19%. Clearance of margins was obtained in 70% of patients. Margins were not successfully cleared in 21% of patients. They required further colposcopy and cytological follow up. Conclusion: Our results (11.5%) of patients undergoing GA for LLETZ are comparable with the national standards. Anxiety and large lesion were the main indications for GA.