

Risk factors of residual disease after cold knife conization and optimizing cone size to predict positive surgical margins: A single centre experience

Introduction: Goal of treatment of precancerous lesion is to remove the cervical lesion with adequate surgical margins as well as whole transformation zone. Positive margins after cold knife conization are a risk factor for residual disease and failure of treatment.

Methodology: It is an ongoing prospective study done in our institute since January 2022 including all the patients undergoing cold knife conization. We measured the diameter and height of cone biopsy specimen preoperatively and followed up the histopathological report for margins, postop complications, final management and follow up test of cure.

Result: A total of 32 women underwent CKC after positive screening test. 30 women [93.75%] were margins negative and 2 women [6.25%] were margins positive. Indication of CKC is post LLETZ margins positive and HR HPV positive at 1 year in 2 [6.25%], ASC-US with Type 3 TZ in 3 [9.375%], LSIL with high grade lesion on colposcopy in 2 [6.25%], HSIL in 20 [62.5%] and ASC-H in 4 [12.5%] women. Mean age of margin negative women was 49.2 years and margins positive were 38.4 years. All margin positive women were premenopausal. Mean diameter and height of cone was significantly lesser in margin positive women [2.6 cm vs 2.5cm; 1.9 vs 1.8 cm]. All the margin positive women had more than 3 quadrants involvement. Quadrant wise involvement of precancerous lesions is 1 quadrant in 7 [21.87%], 2 quadrants in 13 [40.63%], 3 quadrants in 5 [15.63%] and more than 3 quadrants in 13 [40.625%] women. 2 [6.25%] women came out to be stage 1A1 and 1B2 squamous cell carcinoma and underwent Total abdominal hysterectomy and Type B hysterectomy respectively. 2 [6.25%] women had endocervical margins positive and have undergone robotic assisted hysterectomy. Rest women were still on follow up with cytology NIELM.

Conclusion: Margin positive status is related lesser diameter and height of cone and strongly associated with more than 3 quadrants involvement of precancerous lesion. However, in present study postmenopausal status was not found to be associated with residual disease.

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