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VIDEOS OF SURGICAL PROCEDURES IN DERMATOLOGY

Cryotherapy in Anatomically Difficult Areas[☆]



Crioterapia en zonas anatómicas de difícil acceso

Introduction

Anogenital warts are a major reason for consulting venerology.¹ No significant differences were observed in the effectiveness of treatments used (cryotherapy, trichloro-medical,² podophyllin or imiquimod), therefore, the preferences of the patient, the experience of the clinician, number and anatomical location of the lesions should be taken into account.^{1,2}

Indications and contraindications

Cryotherapy is a cheap, simple method that causes cytolysis¹ and stimulates the immune response, with only local adverse effects,¹ making it ideal in patients with various contraindications such as pregnant women.² The main limitation of this technique is to define the intensity and duration of treatment¹ and the difficulty to reach anatomical areas of difficult access.

Description of the procedure

We propose using a Foley catheter of CH16 with two lights to which we resected the proximal portion. We use a 2 ml syringe after cutting off the flaps of the upper part and linked both modified elements. This system is then connected to the Cry-Ac[®] by the resected portion of the Foley catheter. Then we adapt to the tip of the syringe a metal suction tip, choosing its thickness according to the desired precision. We use a latex protector to isolate

the entire system and prevent entering in direct contact with the patient. Only the suction probe will be of a single use.

Conclusions

In this way, we reach difficult-to-access anatomical areas such as the anal canal, vagina or oral cavity, still allowing us to keep the Cry-Ac[®] vertical which is required for its functioning (video).

Appendix A. Supplementary data

Supplementary data associated with this article can be found, in the online version, at [doi:10.1016/j.adengl.2018.09.017](https://doi.org/10.1016/j.adengl.2018.09.017).

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C. Salas Márquez,^{a,*} J.B. Repiso Jiménez,^a
L. Padilla España,^b M.T. Fernández Morano^a

^a *Departamento de Dermatología, Hospital Costa del Sol, Marbella, Málaga, España*

^b *Departamento de Dermatología, Hospital Virgen Macarena, Sevilla, España*

*Corresponding author.

E-mail address: cristi.csm@gmail.com (C. Salas Márquez).

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