

Patient information

Dermatology - curette and cautery/shave excision

Curettage and cautery is a procedure in which your dermatologist/specialist nurse scrapes off a skin lesion with a curette, a small spoon-like instrument with sharp edges. Shave excision is a similar procedure. In both procedures the skin surface is sealed by applying heat.

What is involved in curettage or shave and cautery of a skin lesion?

The doctor/nurse will explain to you why your skin lesion needs treatment and the procedure involved. You will be asked to sign a consent form to indicate that you understand and agree to the surgical procedure. Tell your dermatologist if you are taking any medication, if you have any allergies or medical conditions.

Your skin will be cleaned with antiseptic and local anaesthetic will be injected into the area. The injection stings for a minute or two as it works. The skin will go numb so no pain should be felt during the procedure. You may feel a pushing sensation, but this should not be painful. The lesion will be sent to a pathology laboratory for analysis. The wound surface is then cauterised (sealed by applying heat). This stops bleeding and helps destroy any remaining lesion.

In curettage the procedure may be repeated two to three times. A dressing may be applied, and instructions should be given on how to care for your wound.

Please tell us in advance if you are on any anticoagulant such as warfarin, clopidogrel, rivaroxaban, apixaban, edoxaban or aspirin (please note this list is not exhaustive). Additionally, please inform us if you have a pacemaker, or if you are allergic to local anaesthetic, or plasters.

What types of skin lesions can be treated by curettage or shave excision?

Curettage is suitable to treat small lesions where the material being scraped off is softer than the surrounding skin or when there is a natural cleavage plane between the lesion and the surrounding normal tissue. Shave excision is used for small naevi (moles) and skin tags.

Will I have a scar?

You will always have some sort of scar. It is impossible to cut or curette the skin without scarring in some way. The scars from curettage are usually flat and about the same size as the lesion that was removed. Some people have an abnormal response to skin healing and these people may get larger scars than usual (keloids and hypertrophic scarring).

How do I look after the wound following skin curettage?

You will be given an information sheet at the time of surgery telling you how to look after the area.

- Your wound may become tender 1–2 hours after the procedure when the local anaesthetic wears off. Make sure you have some paracetamol at home, this is usually better than aspirin, which can increase bruising.
- You may need to keep the wound dry for at least 48 hours.
- You may need a supply of plasters and some antiseptic cream such as Savlon.
- You should avoid strenuous exertion and stretching of the area.
- The wound will take approximately 2-3 weeks to heal. Sometimes it can take longer after curettage. The scar will initially be red and raised but usually reduces in colour and size over several months.

What can I do to reduce the risk of infection?

Have a shower or bath the day before and on the day of the procedure. Do not shave around the area of the operation. If hair removal is needed it is best done immediately before the procedure by the dermatologist or nurse.

How do I find out the results of analysis of the lesion?

For some patients we make an appointment to come back to the clinic for the results. However, sometimes we communicate your results by letter or phone. The results may take several weeks to become available. If by 6-8 weeks after the surgery, you have not been contacted, please contact the dermatology department.

Can the problem come back after surgery?

It is sometimes impossible to see exactly where the edge of a skin lesion is. If the lesion is incompletely removed there is then a chance of it coming back. It is sometimes clear when the lesion is analysed that there is some left behind. Depending on what type of skin lesion it was we may then advise further surgery, or you may be asked to come for further checkups. For many skin lesions we will simply advise you to report back to us or to your GP. If the lesion is totally harmless and it returns in a minor way you may not need to do anything further.

General advice

If you are unable to attend for your appointment, please contact the dermatology minor operations bookings administrator on 01284 713853, as soon as possible.

The surgery will take about 15-40 minutes. Waiting times are unpredictable so please leave plenty of time.

You may eat and drink as normal before the skin surgery. You may bring a friend with you, but they will not usually be allowed into the theatre.

You must arrange for someone to drive you home. Although you may feel well enough to drive, we have heard that some insurance companies would not cover you for an accident if it were immediately following a procedure.

If you have no option other than public transport, we advise that you have a companion with you. For larger procedures we advise against taking public transport.

Please wear clothing that is loose enough to allow a dressing to be applied underneath. You may need to take pain killers such as paracetamol after the procedure, make sure you have a supply of these and also some dressings or plasters at home.

If you would like any information regarding access to the West Suffolk Hospital and its facilities, please visit the website for AccessAble (formerly DisabledGo)
<https://www.accessable.co.uk>

