

## All about colposcopy



*Obstetrics & Gynaecology*

patient**information**

Hearing about your experience of our services is very important as it means we can pass compliments to our staff and make improvements where necessary. Tell us what you think at [feedback@rothgen.nhs.uk](mailto:feedback@rothgen.nhs.uk)

#### Slovak

Ak vy alebo niekto koho poznáte potrebuje pomoc pri pochopení alebo čítaní tohto dokumentu, prosím kontaktujte nás na vyššie uvedenom čísle alebo nám pošlite e-mail.

#### Slovensky

#### Kurdish Sorani

كوردی سۆرائی  
نەگەر تۆ یان کەسێک کە تۆ دەناسی پێویستی بەیارمەتی ھەبێت بۆ نەوێ لەم بەلگەنامە بە تێبگات یان بێخۆتێنتەو، تکایە پەیوەندیمان پێوە بکە لەسەر نەو ژمارەییە سەرھوددا یان بەو نێمەیلە.

#### Arabic

عربي  
إذا كنت أنت أو أي شخص تعرفه بحاجة إلى مساعدة لفهم أو قراءة هذه الوثيقة، الرجاء الاتصال على الرقم اعلاه، أو مراسلتنا عبر البريد الإلكتروني

#### Urdu

اُردو  
اگر آپ یا آپ کے جاننے والے کسی شخص کو اس دستاویز کی سمجھنے یا پڑھنے کیلئے مدد کی ضرورت ہے تو برائے مہربانی مندرجہ بالا نمبر پر ہم سے رابطہ کریں یا ہمیں ای میل کریں۔

#### Farsi

فارسى  
اگر جناب عالی یا شخص دیگری که شما او را می شناسید برای خواندن یا فهمیدن این مدارک نیاز به کمک دارد لطفاً با ما بوسیله شماره بالا یا ایمیل تماس حاصل فرمایید.

If you require this document in another language, large print, braille or audio version, please contact Patient Information on 01709 424281 or email [patientinformation@rothgen.nhs.uk](mailto:patientinformation@rothgen.nhs.uk)

## Why have you been invited to the Colposcopy Clinic?

Your Doctor or Practice Nurse has referred you to the Colposcopy Clinic to check your cervix (neck of the womb).

In the majority a colposcopy examination is undertaken to investigate an abnormal or unsatisfactory cervical screening sample (smear test), but may also be undertaken to investigate other problems such as unusual vaginal bleeding or an unusual appearance of the cervix.

The purpose of this leaflet is to give you information on what may occur at your colposcopy appointment visit in relation to your particular problem.

Colposcopy examination for:

### **Abnormal or unsatisfactory screening sample**

Please see page 6

Colposcopy examination for:

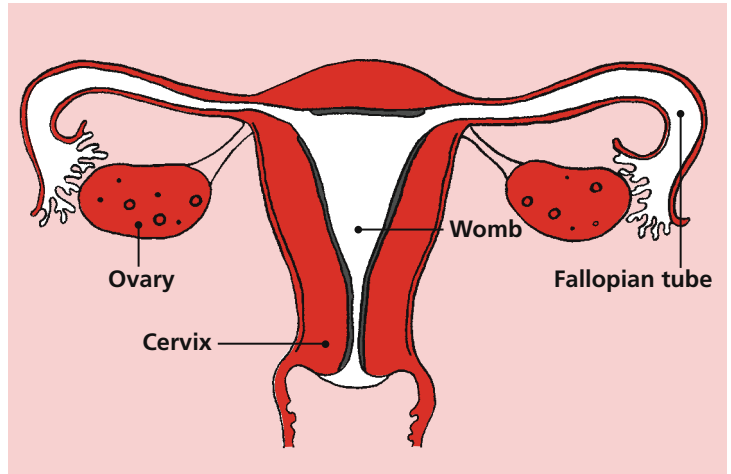
### **Investigating an unusual appearance of the cervix, unusual vaginal bleeding or discharge.**

Please see page 14

**Please see the section explaining what is likely to happen at your particular appointment, as this will depend on why you have been referred for colposcopy.**

## What is Colposcopy?

Colposcopy means looking at your **cervix** (the lower part of the womb) with a special microscope on a stand called a colposcope. This is the best method of investigating your problem as it allows a magnified view of the cervix, which is much clearer than with an ordinary light.



## Coming for Colposcopy

- Your appointment will be at the Colposcopy Clinic located in the Endoscopy Unit on C level at Rotherham Hospital
- You are welcome to bring a companion if you would like some support or company before and during your examination. However, on busy days and due to lack of space your companion may not be able to sit with you in the recovery area if you need to rest afterwards (please check with the nurse)

### Important note

- You should set aside about 1 hour for your appointment to allow time for discussion, examination and rest if needed
- If you are expecting a period on the day of your appointment, and you take the 21 day contraceptive pill, you may wish to carry on to the next packet without a break. This will delay your period and enable you to attend this appointment
- If you will be on a period on the day of your appointment, please ring for advice.
- If you wear a loose skirt this can be left on and may make the examination seem more comfortable and private
- Please bring a note of the date of your last period and the name of any medication you take (including the pill)
- Please tell the clinic staff if you plan to go on holiday within 4 weeks of your appointment in case treatment is being considered. (Although there are no known health grounds for avoiding travel following treatments, overseas medical attention for complications arising from the treatment may not be covered by insurance)
- **You can ask questions at any time**

## All about colposcopy

At your choice, **we are more than happy for your companion to be present during the consultation** and examination. However, please be aware that personal questions are sometimes a necessary part of the consultation, so consider this when deciding.

The examination will be undertaken by a doctor or specialist nurse referred to as a **Colposcopist**. You might also be seen by a doctor in training who is being closely supervised by the Colposcopist. You will be informed by the nurse before you enter the examination room and your permission gained.

### **The colposcopy examination for abnormal or unsatisfactory screening sample**

Cervical screening samples are taken to check the health of your cervix. They consist of a sample of cells from the skin of the cervix, which can be examined under a microscope to look for abnormalities which occur before cancer develops. Cervical cancer is very rare in women who attend for regular cervical screening. Having an abnormal result is very unlikely to mean that you have cancer. Many women have, at some time, an abnormal cell change on their cervix. In the majority of cases the cells will change back to normal, but sometimes these cells remain and show up on cervical screening and those women may be invited for colposcopy.

If your screening sample has been reported as 'abnormal', this means that some of the cells have shown abnormal changes.

## All about colposcopy

If your sample is classed as inadequate this means that the sample was unsuitable for screening, often due to a low number of cells on the sample or infection and you may have been invited for a repeat test. However, if the problem persists in either case you may be referred for a colposcopy examination to check your cervix for abnormal cells with the colposcope.

In addition, women who have previously undergone treatment for cervical abnormalities may have a normal (Negative) screening sample but the Human Papilloma Virus (HPV) may be detected. This will prompt a colposcopy examination to exclude further changes.

### The colposcopy examination

Once in the examination room the colposcopist will go through a series of questions with you. The colposcopist will give you an explanation of your screening sample result (smear result) and what is going to happen with the examination. You will also be given an explanation about what treatments are available if abnormal cells are seen on your cervix.

You can also ask any questions you may have at this time. You will need to remove your underclothes below the waist. Modesty sheets are provided so you will be kept covered as much as possible. You will be asked to sit almost upright at the front of the couch with your legs supported on rests. A nurse will be with you so please tell her if you are uncomfortable, as the couch can be adjusted.

## All about colposcopy

The Colposcopist will use a speculum to open the vagina (like having your cervical screening test (smear) and will look through the colposcope to view your cervix. The colposcope is placed nearby, but does not touch you or enter your body.

The surface of your cervix is sprayed with a cold solution which may sting a little. The solution works by staining white or highlighting any area on your cervix where the changes on you screening sample (smear) may have come from. The colposcopist will check this area thoroughly and if necessary a sample of tissue (punch biopsy) may be taken to confirm the diagnosis or alternatively treatment may be offered at the same visit.

Not all abnormalities need treatment straight away, as some may disappear on their own. The colposcopist will discuss this with you and help you make a decision regarding treatment if necessary.

You have the opportunity to watch the examination on a TV monitor. If so, the nurse will explain the picture to you, but remember that the picture is magnified

At any time during your colposcopy examination you may ask questions on anything you do not understand. Please make sure you are clear about what is explained to you.



## All about colposcopy

The Colposcopist will also give you an explanation following the examination and tell you what will happen next. You will be informed of the results of any tests either by letter or at a further appointment.

The actual colposcopy examination only takes about 15 minutes.

### **There are two types of treatment available to you.**

During your colposcopy examination an abnormal area may have been identified and treatment recommended. These abnormal changes may be destroyed using cold coagulation (heated probe) or alternatively cut away using loop diathermy (with a fine loop of wire).

You will be awake during your examination and for any treatment, which might be carried out in clinic. Local anaesthetic (an injection to numb the cervix) is sometimes necessary. If biopsies are taken or treatment is carried out, you will be given advice on what to expect and any restrictions on activities which may be necessary.

**Very occasionally it is necessary for treatment to be carried out while you are asleep under a general anaesthetic. The colposcopist will discuss this with you.**

### **Loop Diathermy**

Loop diathermy treatment may be offered to you at your first appointment but only when the whole area of abnormal cells can be seen. Alternatively, it will be offered following confirmation of abnormal changes shown on a punch biopsy.

Following a colposcopy examination, you will be given an injection of local anaesthetic to numb your cervix before treatment starts. After this you should not feel pain in your cervix, although you may feel a dull period like cramp in the lower abdomen.

Using a fine wire called a loop heated with electricity, the area of abnormality is cut away. The wound crater left behind is then sealed with diathermy to stop heavy bleeding and the whole sample removed sent away for further analysis.

You will need 20 minutes or so to rest before you go home, and then take it easy for the rest of the day. You may experience bleeding and discharge up to 2 weeks after treatment, followed by a brown gritty discharge lasting a further 2 to 3 weeks. To reduce the risk of infection during this time you will be advised to avoid intercourse, tampons or swimming.

### **Loop Cone Diathermy**

In a small number of women the whole area of abnormal cells can't be seen as it may go into the opening of the cervix. This does not mean that it is any more serious. The Colposcopist might suggest local oestrogen treatment (pessaries or cream), which may bring the area into view before repeating your colposcopy examination at a later appointment.

Alternatively, a loop cone diathermy treatment may be arranged. This is carried out in the same way as loop diathermy, but removes a deeper area of tissue. The only difference is you will remain in the department for about 1 hour after treatment for observation before you go home.

You may experience bleeding and discharge up to 2 weeks after treatment, followed by a brown gritty discharge lasting a further 2 to 3 weeks. To reduce the risk of infection during this time you will be advised to avoid intercourse, tampons or swimming.

## Cold Coagulation

To be suitable for cold coagulation treatment, abnormal changes must have been confirmed on a punch biopsy taken at a previous visit and therefore is not available at your first visit. It is usually carried out for persistent low-grade abnormal changes, i.e. changes which haven't settled within a certain time (usually 12 months). At your return visit the colposcopy examination is repeated to confirm that changes are still present. Depending on the size of the area to be treated or your choice you will be offered an injection of local anaesthetic to numb your cervix before treatment starts. After this you should not feel pain in your cervix, although you may feel a dull period like cramp in the lower abdomen.

Cold Coagulation involves applying a small probe heated approximately to 100 degrees centigrade to the cervix. Each application takes 20 seconds. Treatment usually takes around 1 minute to complete. Therefore, some women choose to proceed with Cold Coagulation without local anaesthetic.

Most women feel well after the treatment, but you may need to rest for 20 minutes or so before leaving the department. You can return to work as soon as you feel able (which may be the same day).

## All about colposcopy

Following cold coagulation a heavy watery vaginal discharge can be expected for about 2 to 4 weeks, accompanied by occasional light bleeding. To reduce the risk of infection during this time you will be advised to avoid intercourse, tampons or swimming.

### **Possible complications**

In spite of precautions being taken to reduce the risk of infection, unfortunately an infection may still develop following biopsies or treatment. There is also a risk of heavy bleeding or haemorrhage, within 24 hours of treatment or up to 2 weeks following treatment.

### **Follow-up after Treatment of Abnormal Cell Changes**

Your next cervical screening test including a HPV test will probably be at your own doctors surgery 6 months after treatment. This will be confirmed in your result letter.

## **Colposcopy examination for Investigating an unusual appearance of the cervix, unusual vaginal bleeding or discharge.**

You may have reported unusual symptoms, like bleeding after sex or bleeding between periods to your doctor or nurse. They may also have some concerns regarding the unusual appearance of your cervix and have referred you for a colposcopy examination. The purpose of the colposcopy examination is to identify the cause and resolve any unusual bleeding symptoms which can sometimes be caused by infection, polyps or a thin fleshy type of skin found on the cervix (Ectropion). The appearance of the cervix can also look unusual due to scarring, previous treatment to the cervix, cysts or polyps.

Cysts are unlikely to cause any problems and do not need removing. Polyps are generally normal, but may cause bleeding so they are usually removed. Although the majority of findings are easily resolved, we do, however, need to exclude a more serious cause and will check for cervical cancer, although this is found only very occasionally. Cervical screening can prevent around 75% of cancers developing but, like other screening tests, it is not perfect and it may not detect early cell changes that may lead to cancer (NHS Cancer Screening 2008). Please remember that this is rare in women who have had regular cervical screening.

**Please now read the section on page 7 titled 'The colposcopy examination'**

## Bleeding after intercourse or abnormal discharge

Bleeding after intercourse or abnormal discharge may be due to infection. If not already done so by your GP, swabs will be taken to check for this. If infection (usually caused by bacteria, which grow naturally in the body), is confirmed, antibiotics may be recommended before considering treatment to the cervix as symptoms may settle.

These symptoms may also be due to a fleshy area of skin on the cervix. This is usually normal immature skin, which bleeds easily when it is knocked during intercourse. This type of skin produces normal discharge. Sometimes the amount of discharge is excessive. Bleeding and excess discharge are likely to settle as the skin matures and becomes less fragile. However, the Colposcopist will need to examine the skin on the cervix with the colposcope to exclude abnormal changes or a more serious cause of your symptoms. If abnormal changes are found, they will be treated as explained on pages 9 to 13. If no abnormal cause is found, you may just want reassurance and no treatment. However, if the bleeding or discharge is heavy or happening frequently you may wish to have treatment to settle your symptoms. In this case, cryo freezing (see page 16) or occasionally cold coagulation treatment (see page 12) may be carried out.

### **Cryo freezing**

Cryo freezing involves applying a small probe to the cervix for one minute, freezing the superficial fleshy layer of skin. Local anaesthetic is not necessary, as the treatment is not painful, although you may feel a dull period like cramp in the lower abdomen.

Most women feel well after the treatment, but you may need to rest for 20 minutes or so before leaving the department. You can return to work as soon as you feel able (which may be the same day).

Following cryo freezing a heavy watery vaginal discharge can be expected for about 2 to 4 weeks, accompanied by occasional light bleeding. To reduce the risk of infection during this time you will be advised to avoid intercourse, tampons or swimming.

### **Other causes of bleeding after intercourse/abnormal discharge**

Your symptoms may be due to a polyp on the cervix. These are usually normal, but they will be removed to settle your symptoms. Very occasionally a more serious cause for your symptoms will be identified, and we do need to exclude cervical cancer. Please remember that cervical cancer is rare in women who have had regular cervical screening.



### Possible complications

In spite of precautions being taken to reduce the risk of infection, unfortunately an infection may still develop following biopsies or treatment. There is also a risk of heavy bleeding or haemorrhage, within 24 hours of treatment or up to 2 weeks following treatment.

### Checklist

- You are welcome to bring a companion for support or company
- Please bring a note of your last period and any medication
- Please inform staff if you plan to go on holiday within 4 weeks
- Please allow up to 1 hour for your appointment
- You may need to have the rest of the day off work (please see the section explaining colposcopy for your particular problem)

## All about colposcopy

### **How to contact us** **Colposcopy Clinic**

Monday to Friday

9.00am to 4.30pm

Telephone 01709 427029

### **Colposcopy Office**

Monday to Friday

9.00am to 5.00pm

Telephone 01709 424300

### **Contact Centre for new appointments**

Telephone 01709 427214

### **Switchboard**

Telephone 01709 820000

### **Useful contact numbers**

#### **NHS Direct**

Telephone 0845 4647

#### **Health Info**

Telephone 01709 427190

#### **Stop Smoking Service**

Telephone 01709 422444

#### **Patient Services**

Telephone 01709 424461

#### **A&E**

Telephone 01709 424455

### **For GP out of hours, contact your surgery**

### **Useful websites**

[www.nhs.uk](http://www.nhs.uk)

[www.gov.uk](http://www.gov.uk)

[www.therotherhamft.nhs.uk](http://www.therotherhamft.nhs.uk)

[www.cancerscreening.nhs.uk](http://www.cancerscreening.nhs.uk)

[www.bsccp.co.uk](http://www.bsccp.co.uk)

### **We value your comments**

If you have any comments or concerns about the care we have provided please let us know, or alternatively you can write to:

Patient Services

#### **The Rotherham NHS Foundation Trust**

Rotherham Hospital

Moorgate Road

Oakwood

Rotherham

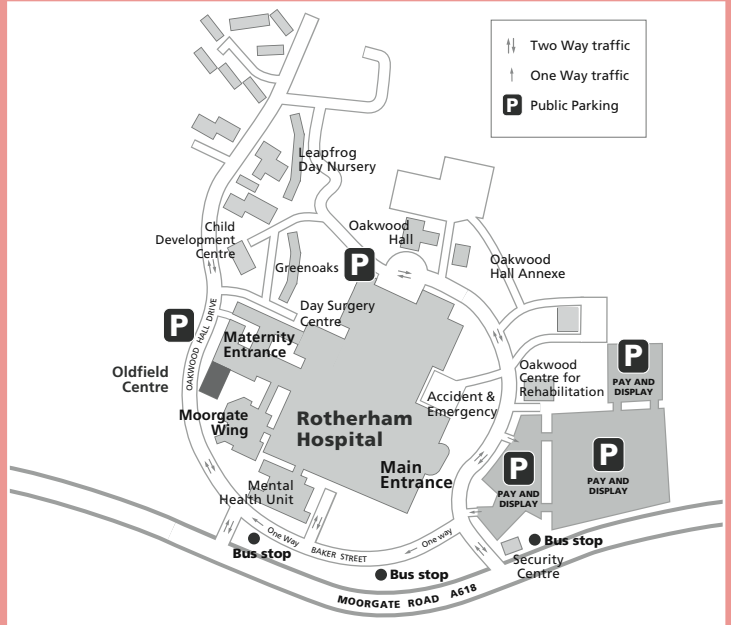
S60 2UD

Telephone 01709 424461

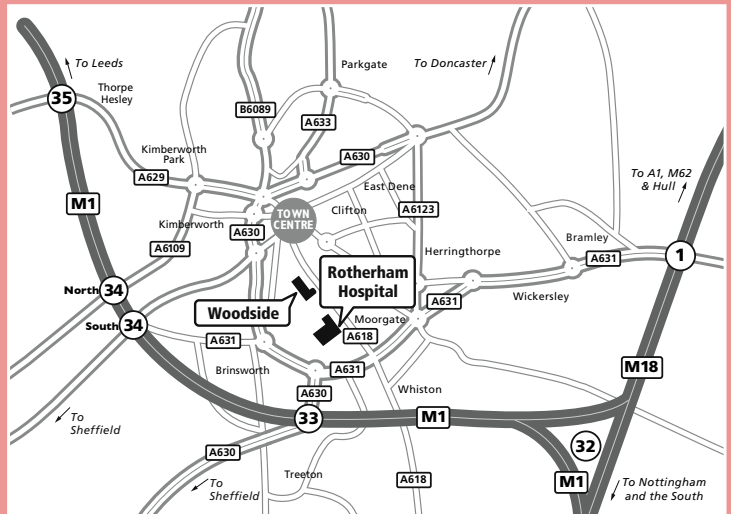
Email [complaints@rothgen.nhs.uk](mailto:complaints@rothgen.nhs.uk)

# How to find us

## Hospital site plan



## Rotherham main routes





LS 521 12/12 V4 WFO



The Rotherham **NHS**  
NHS Foundation Trust

**Rotherham Hospital**  
Moorgate Road  
Oakwood  
Rotherham  
S60 2UD

Telephone 01709 820000  
[www.therotherhamft.nhs.uk](http://www.therotherhamft.nhs.uk)

