

Endometrial pipelle biopsy

Information and advice for patients

Gynaecology

What is an endometrial pipelle biopsy?

This is the name of the procedure which takes a small sample of tissue from the lining of the womb (endometrium). This sample is then sent off to the laboratory to check if you have any cancer or other abnormal cells in the lining of your womb.

The biopsy may give answers to:

- Why you are having abnormal vaginal bleeding (heavy or prolonged periods, or bleeding between periods).
- Why you are having some bleeding after the menopause.
- Why an ultra sound scan shows you have a thickened lining of your womb.

If you need to have the biopsy taken it will be as part of your outpatient appointment with either a doctor or a nurse.

Who is the biopsy not suitable for?

The biopsy is not suitable for you if you:

- Are pregnant
- Have an infection in the vagina or pelvis
- Have pelvic inflammatory disease

What is the benefit?

The benefit of having the biopsy taken is to check for any abnormal cells or signs of cancer so that treatment can be offered for your condition.

What are the risks?

The procedure is generally very safe. You may experience mild period type pain during the procedure. Very occasionally you may need some simple painkillers like paracetamol after the biopsy but most women feel a little discomfort for only a short time whilst the biopsy is being taken.

In rare cases, patients may be at risk of:

- Prolonged bleeding
- Infection
- Uterine perforation (making a hole in the womb) but this is very rare.

Sometimes it can be difficult to get the biopsy, especially if you haven't had any children or have had treatment in the past to your cervix – in this case we may have to consider taking you to theatre and giving you a general anaesthetic so that we can get a biopsy. If this is the case it would be arranged to take place on a different date after your outpatient appointment.

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What are the risks of not having the biopsy?

If you do not have the biopsy then we cannot check for any abnormal cells or signs of cancer. If we don't get a biopsy we are unable to diagnose and offer treatment for any potential conditions.

Are there any alternatives to this test?

There are no alternatives.

Preparing for the biopsy

You don't need to do anything in preparation for your biopsy. You are still able to have the procedure carried out if you are on your period or experiencing some postmenopausal bleeding.

During the biopsy

If you need to have the biopsy taken it will be taken as part of the examination that the doctor or nurse will carry out.

The doctor or nurse will explain to you what examinations they are going to do and ask if you are happy to have the biopsy taken.

The chaperone nurse, who will also be in the room, will help you get undressed and positioned on the examination couch where you will be lying down for the examination. This nurse will be with you throughout the examination and procedure.

The doctor or nurse will then explain that they are about to start the examination and talk you through the procedure.

1. Firstly they will insert a speculum into the vagina. A speculum is an instrument used to open the vagina – similar to when you have a smear test taken. This enables the doctor or nurse to examine the walls of the vagina and cervix to see if they appear healthy.
2. The doctor or nurse will then explain that they are about to take the pipelle biopsy by passing a thin plastic straw through the cervix then into the womb. The biopsy is taken by slight suction as the inside of the straw is pulled out causing the suction. This part of the procedure can cause the crampy period type pain that is often experienced. This pain generally settles once the procedure is finished, but a few women may feel like they want some simple painkillers.
3. Sometimes the procedure to take the biopsy is carried out more than once – this is to ensure a good amount of tissue is obtained to send to the laboratory to be tested.
4. Occasionally the position of the cervix is at an angle – which is completely normal, but this can make it slightly difficult to take the biopsy. If this is the case sometimes an instrument

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might be used to hold onto your cervix enabling it to be held in a better position to make it easier to take the biopsy.

5. After taking the biopsy the speculum will then be removed.
6. The nurse will then help you to get off the examination couch and will help you to get dressed if you need assistance.

The biopsy sample will then be sent off to the laboratory to be examined and tested.

After the biopsy

If you experience any tummy discomfort after the biopsy has been taken you can take some Paracetamol or Ibuprofen that you may have at home.

Once you are dressed you can go home. You are able to go to work if you are feeling well and are also able to drive after the procedure.

You may experience some vaginal bleeding for the next day or so after having the biopsy taken and this is completely normal. It is advisable to wear a sanitary towel just in case this happens and the nurse who is acting as a chaperone throughout the procedure will offer you a sanitary towel when you are getting dressed after having the biopsy taken.

You can continue with normal activities such as having a bath or shower, exercise and driving.

We recommend that you do not have sex until the bleeding has stopped completely.

How do I get the results?

Your biopsy sample will be sent to the laboratory for testing. We will write to you and your GP with the results. It can take between 1 - 4 weeks before you receive the letter with the results.

If you require further treatment or a follow-up appointment, we will send you an appointment letter with the date and time to attend the Gynaecology Outpatient Clinic.

In some cases, we may call instead of writing a letter.

Symptoms to report

If you start experiencing some heavy vaginal bleeding, or strong smelling discharge then we advise you to contact your GP as you may have an infection and need some medication.

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Contact details

If you have any queries or concerns, please contact the Gynaecology nurses on the following number:

Tel:

Further information

For more information about our hospitals and services please see our websites www.swbh.nhs.uk and www.swbhengage.com, follow us on Twitter @SWBHnhs and like us on Facebook www.facebook.com/SWBHnhs.

Sources used for the information in this leaflet

- Cooper J M, Erickson M L, 'Endometrial sampling techniques in the diagnosis of abnormal uterine bleeding', June 2000
- Demirkiran F et al, 'Which is the best technique for endometrial sampling: Aspiration (pipelle) versus dilatation and curettage (D&C)', November 2012
- Rutherford T, Auerbach R, 'Endometrial biopsy, a review of sampling techniques', April 2012

If you would like to suggest any amendments or improvements to this leaflet please contact the communications department on 0121 507 5495 or email: swb-tr.swbh-gm-patient-information@nhs.net



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