

Outpatient hysteroscopy

Information and advice for patients

Gynaecology

What is an outpatient hysteroscopy?

A hysteroscopy is an investigation that allows your doctor or nurse to look directly inside your womb (uterus) using a very small camera (hysteroscope). An outpatient hysteroscopy is when the hysteroscopy is done without a general anaesthetic (where you are put to sleep) and you do not need to be admitted to hospital.

Your consultant may also carry out other procedures during the hysteroscopy, such as taking a sample of the lining of your womb, removing polyps or inserting a coil, but they will only do this after discussing it with you and getting your consent.

What are the benefits of an outpatient hysteroscopy?

The benefit of a hysteroscopy is that it can be used to investigate the cause of the following problems:

- Heavy or irregular bleeding that has not got better with tablets from your doctor.
- Bleeding in-between periods.
- Bleeding more than one year after your menopause.
- Irregular bleeding whilst you are taking Hormone Replacement Therapy (HRT).
- Infertility or recurrent miscarriages.

Having the procedure without a general anaesthetic is beneficial because you will not need to be admitted to hospital or stay overnight, you will recover more quickly and there are fewer risks than with a general anaesthetic.

What are the risks of an outpatient hysteroscopy?

- **Pain:** You may experience some discomfort during the procedure but most women do not experience significant pain. Please tell us if you are finding the procedure painful.
- **Vaginal bleeding and discharge:** Most women will experience some vaginal bleeding or discharge after the hysteroscopy, but this usually settles by itself within a few days.
- **Infection:** You may develop an infection in your womb or vagina after the procedure. This occurs in 1 – 10 out of 100 women.
- **Damaging the uterus:** There is a risk of making a small hole in the uterus with the telescope. This occurs in less than 1 in 100 women who have the procedure, but could cause bleeding which may need treatment.
- **Not being able to complete the procedure:** In less than 1 out of 100 women, the procedure cannot be completed because the hysteroscope cannot get into your womb.

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- **Damage to nearby structures:** There is a risk that your bladder, bowel or major blood vessels could become damaged during the procedure. This occurs in less than one out of 1,000 women.
- **Infertility:** In less than 1 one out of 1,000 women, the procedure can cause damage that leads to infertility.

Are there any alternatives to this procedure?

The alternative is to have the hysteroscopy performed with a general anaesthetic (where you are put to sleep). This can be performed in the Surgical Day Unit (Sandwell Hospital), Birmingham Treatment Centre (City Hospital) or in Main Theatre (Sandwell or City Hospital). If you would like more information about having a hysteroscopy with a general anaesthetic we have a separate leaflet explaining the procedure and its risks and benefits.

What are the risks of not having a hysteroscopy?

If you do not have a hysteroscopy it may be more difficult for your doctor to diagnose the cause of your problem and decide on the most appropriate treatment.

Preparing for the procedure

- Before the procedure you may need to attend a pre-operative assessment clinic where we will check that you are well enough for the procedure. You will be sent an appointment if this is the case.
- It is important that you are not pregnant when this procedure is carried out. If you are sexually active and have not reached the menopause you should use contraception for the month before your appointment. A pregnancy test may be performed prior to the procedure being attempted.
- The procedure cannot be carried out if you are bleeding (unless it is light). If you think your period will be due on the day of your hysteroscopy, please contact us on 0121 507 3763 to arrange another appointment.
- You should eat, drink and take your medication as normal before the procedure.

When you arrive

Your hysteroscopy will be carried out in in the Gynaecological Surgical Procedures Suite, in the Alpha Suite at Sandwell General Hospital. Your appointment will take around 30 minutes.

The consultant will then explain the procedure to you, answer any questions you have and you will be asked to confirm your consent by signing a consent form.

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If you need pain relief medication for the hysteroscopy this will be given by a nurse or doctor before the procedure begins.

The procedure

The hysteroscopy only takes a few minutes. This is what happens:

1. You will be asked to change into a hospital gown and lie on a couch with your legs rested on the supports on either side of it.
2. The couch will be raised to the appropriate height for the examination to begin.
3. Slowly and gently an instrument called a speculum (also used when you are having a smear test) will be inserted into your vagina. This allows the consultant to have a clear view of your cervix (neck of the womb).
4. A warm antiseptic solution may be used to clean the surface of your cervix.
5. A very fine telescope (hysteroscope) will be inserted into your womb through your vagina and cervix. A water-like solution is used during the procedure to help with the passage of the telescope so you will experience a wet feeling.
6. The camera sends images to a television monitor, which you may watch if you wish, allowing the consultant to have a clear view of the inside of your womb. Images are usually taken at this point and stored securely in your medical notes.
7. The consultant will then remove the hysteroscope carefully.

During and after the procedure you may have some crampy period-like pain and will have a small amount of bleeding; this is normal.

Gas and air is available for you to use during the procedure should you require it, the clinic staff will teach you how to use this.

After the procedure

Following a short recovery period (and a cup of tea) during which your blood pressure and pulse may be monitored you will be able to go home. It may be beneficial to have a friend or relative to accompany you as a small number of ladies will not want to drive or go back to work straight away.

Sanitary towels (basic ones) are provided and painkillers are available if you need them.

You will be able to carry out your normal activities when you are at home but should avoid sexual intercourse, using tampons and swimming for two weeks after the procedure.

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Results

The consultant will write to you and your GP with the results of your hysteroscopy within a few weeks.

Symptoms to report

If you experience any of the following symptoms after the procedure please see your GP or in an emergency go to your nearest A&E department:

- heavy bleeding
- abdominal (tummy) pain
- a temperature of 38°C or higher

Contact details

If you need to change your appointment or have any questions or concerns and would like to speak with a nurse or doctor please call:

Gynaecological Surgical Procedures Suite

0121 507 3763 Monday - Friday, 9am - 5pm

Feedback

We need and appreciate your feedback on your experience with us and invite you to complete a short questionnaire before you leave the hospital after your hysteroscopy. The information you provide will be anonymous and will be used to improve the service we provide.

Further information

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

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Sources used for the information in this leaflet

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- Royal College of Obstetricians and Gynaecologists (2008). *Diagnostic hysteroscopy under general anaesthesia* [Consent advice 1]. [Online]. London: RCOG. Available at: <https://www.rcog.org.uk/en/guidelines-research-services/guidelines/consent-advice-1/> [Accessed 08 January 2020].
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