



Sandwell and West Birmingham
NHS Trust

Colposcopy procedure

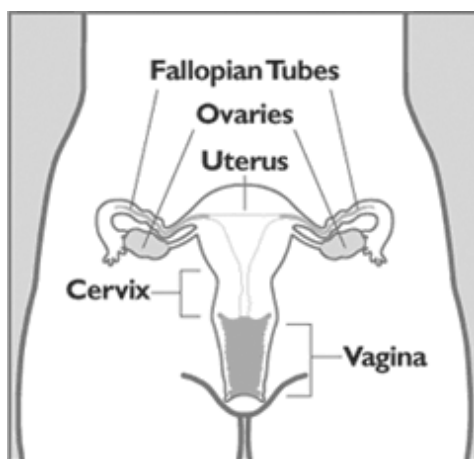
Information and advice for patients

Colposcopy

What is NHS Cervical Screening Programme?

This programme was set up in 1988 to reduce the chances of women developing cervical cancer. It aims to screen all women between the ages of 25 and 64 either every three years or every five years. If you are between 25 and 49 you will be screened every three years. If you are between 50 and 64 you will be screened every five years. The screening programme aims to pick up abnormal changes in the cells in the cervix long before they have a chance to become cancer. A colposcopy examination is the only way to check these changes and offers the benefit of quick and easy treatment if necessary, usually in the clinic. It is a very successful programme which research suggests saves at least 4500 lives a year (taken from Cancer Research UK).

Female Reproductive System



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Why have I been referred for a colposcopy?

If this is your first colposcopy appointment: you're usually invited for colposcopy after cervical screening for one of these reasons:

- your cervical screening result shows high-risk HPV and also detected some cell changes
- you don't have cell changes, but you've had 3 cervical screening results in a row that show high-risk HPV
- you've had several cervical screening tests which all gave an unclear result
- the nurse or doctor who did your cervical screening wanted a colposcopist to have a closer look at your cervix for a second opinion.

You may also be referred for colposcopy because you've had unusual bleeding from your vagina that isn't your period (such as bleeding after sex or after menopause).

If this is your second or follow-up colposcopy appointment - you could be going to a second or follow-up colposcopy appointment if:

- a biopsy from your cervix was done during your first colposcopy appointment and it shows you need treatment
- you've been invited back for a further check-up after your first colposcopy appointment
- you have CIN2 cell changes and these are being checked.

What is HPV?:

HPV is a virus spread through skin to skin contact and there are no symptoms. HPV is extremely common and 80% of sexually active people will contract it at some point. In the majority of cases, the body's immune system will clear the virus without the need for any further treatment. Sometimes, however, the body does not clear the virus. If HPV persists, it can cause pre-cancerous and cancerous changes to the cervix. This is why smear tests specifically check for HPV.

1. If you have had colposcopy treatment in the past.

If a test to detect HPV has been carried out on your cervical screening sample taken during your follow-up check and shows the presence of HPV or moderate or severe dyskaryosis, you will be asked to come back to colposcopy for assessment of your cervix

2. Other signs or symptoms not related to having a cervical smear.

You may not have been referred for a colposcopy because of a cervical screening test. However, you may have been experiencing signs or symptoms which may be related to the health of your cervix. The colposcopy clinic is the best place to have these symptoms checked.

What is a colposcopy?

Having a colposcopy is similar to having a cervical screening test. You will lie on a special couch that has supports for your legs. The colposcopist will warm and lubricate a speculum (a special instrument) and place it in your vagina (the same as when you had a cervical screening test). This will allow them to see your cervix. The colposcope (which, put simply, is binoculars on a stand) gives the colposcopist an enlarged 3-D view of the cervix. The colposcope does not enter the vagina.

The colposcopist will put a liquid onto the cervix with a cotton wool ball – this may be cold and sometimes sting a little. This liquid highlights any abnormal cells and allows the colposcopist to make a diagnosis. If everything is normal, you may be allowed to go home straight away. However, the diagnosis may mean that it is necessary to take a punch biopsy or carry out treatment.

What is a punch biopsy?

A punch biopsy is a tiny piece of tissue taken from the cervix and sent to a pathologist so that it can be examined closely to see if there are changes in the cells. You will not normally need a local anaesthetic. The biopsy is about the size of a grain of rice. You may have a brown or red discharge from your vagina for the next few days after this. You may also feel discomfort like period pain for the next few hours. You should take your normal painkillers to ease this pain, but do not take more than recommended dose.

Is there anything that I need to know before I have a colposcopy?

- There is no need to avoid having sex before you have a colposcopy examination, unless you have a coil fitted.
- You can eat and drink as normal before your appointment.
- Bring a list of any medication you are taking and let the colposcopist know of any medical history or allergies.

- Please also make a note of when you had your last period.
- You will be asked to remove clothes below the waist. Because of this, you may find it more comfortable to wear a full skirt or dress, which you would not need to remove for the examination.
- If you need treatment during your appointment, you may need to remove any jewellery you wear below the waist (such as belly button or vaginal piercings). It is important that you are aware of this so you can remove the jewellery before you come for your appointment.
- After the examination, you may have some discharge from your vagina. Although we will provide pads, you are more than welcome to bring panty liners with you if you prefer.
- You should be able to drive home afterwards, but for car-insurance purposes, you should ask your colposcopist whether you are fit to drive after your treatment. It may be wise to bring someone with you in case you do not feel well after your appointment.

What will happen during my appointment?

When you arrive at the clinic, we will aim to see you as close to your appointment time as possible, but please be patient if there are delays that we could not have expected beforehand. You will then be called for your colposcopy, where you will meet the colposcopist (who may be a doctor or nurse) and the nurses who will be with you during the examination.

During your colposcopy appointment, the doctor or nurse will take down your medical history and explain the procedure to you. Following this, the colposcopist will carry out the examination. How long your appointment will take depends on whether any procedures are necessary but it is usually no longer than 20 minutes to half an hour.

What if I need treatment?

The aim of treatment is to destroy or remove abnormal cells and allow healthy cells to replace them. Most types of treatment can be done as an outpatient in the colposcopy clinic on your first appointment, so you may want to arrange a fairly quiet day in case you are offered this. If you have a coil fitted, please use an extra form of contraception for seven days before your appointment, as sometimes it is necessary to remove the coil before you have the treatment. The treatment at this clinic is usually loop diathermy and cold coagulation or cryocautery.

Types of treatment

Loop diathermy

This treatment uses an electric current to remove abnormal tissue from your cervix. A local anaesthetic (similar to that you would have at the dentist) is used to numb the cervix, and the abnormal cells are then lifted off the cervix using a wire loop. The colposcopist may then apply mustard-coloured paste to seal the area. During the procedure, you will hear various noises from the machinery. The examination and treatment lasts roughly 15 minutes. Afterwards, you will be given a sanitary pad (or you may want to bring your own) and asked to rest for a short time before leaving.

Cryocautery

Cryocautery is a procedure which destroys the tissue on the cervix by freezing it with nitrous oxide. It is usually performed to reduce the symptoms of excessive discharge or bleeding after

having sex but can also be used to treat low-grade changes to the cervix. The colposcopist will place a small probe on the cervix for two minutes, freezing the abnormal tissue. You should not feel any discomfort during the procedure. You may experience a watery discharge for two to four weeks after the treatment as the cervix heals.

Cold coagulation

This treatment destroys abnormal cells. A local anaesthetic (similar to that you would have at the dentist) is used to numb the cervix. This may sting or hurt a little. The colposcopist will then use a probe to treat your cervix. This will last for 30 to 60 seconds and may feel warm but should not be painful. The whole procedure takes roughly five to 10 minutes. After the treatment you will be given a sanitary pad to wear (or you may want to bring your own) and information about what to do after your treatment.

What will the treatment show?

The technical term used to refer to cell changes confirmed by a biopsy or treatment is cervical intra-epithelial neoplasia, more commonly known as CIN.

To make distinctions between the various states of changes in the cells, doctors have developed an increasing scale from one to three according to how many of the cells are affected. So, treatment results will most commonly be CIN 1, CIN 2 or CIN 3. The results of this treatment will show what follow-up you will need.

What normally happens after treatment?

- Most women will feel okay after treatment. In a very small number of cases, the following may happen.
- Some women feel dizzy or faint when they get up following the treatment. If this happens to you, the nurse will ask you to lie down and will keep you under close observation until you have fully recovered.
- If you have a punch biopsy, you may experience discomfort like period pain for the next few hours. You should take your normal painkillers to ease the pain but not take more than the recommended dose.
- It is normal to have some bloodstained discharge after treatment. If you have bloodstained discharge from the treatment, do not use tampons. Instead, use pads or panty liners. You should not use tampons until four weeks after the treatment. Do not worry if you do not have any discharge.
- You should avoid sexual intercourse for up to four weeks following a treatment to allow the cervix to heal.
- You should avoid heavy lifting or vigorous exercise for a day or so after treatment. You should also avoid swimming for at least two weeks or until the discharge has stopped because of the risk of infection.
- If you have any questions after your treatment, please contact the colposcopy clinic on 0121 507 4246 for City Hospital or on 0121 507 3249 for Sandwell Hospital.

We will send you a letter with your results. If you have not received this letter eight weeks after your appointment, please contact the clinic.

Rare problems with treatment

A small number of patients may suffer a pain in their pelvis or heavy bleeding from the treated area. This may happen immediately after treatment or within the next couple of weeks and may mean you have an infection, particularly if you have a temperature or strong-smelling discharge. It is very important that you contact your family doctor or the colposcopy clinic as you may need another examination or antibiotics.

Will I need to have check-ups?

Yes. It is important to keep your appointments to make sure that your cervix is healthy. Most colposcopy clinics recommend that you have a follow-up check between six and 12 months after the examination or treatment, although this will depend on the results of your examination. The check-ups may be back at the colposcopy clinic or could be at your family doctor's surgery or local clinic. We will discuss the exact details with you. It is very important to complete the follow-up programme as this allows us to check that your cervix stays healthy.

Practical questions

What should I do if I have a period on the day of my colposcopy?

Ring the clinic and check that you should go ahead with your appointment, as this often depends on what your appointment is for. If you feel awkward about having an examination during your period, contact the clinic and change the time of your appointment.

Can I have sex in the week before I have a colposcopy?

You do not need to avoid having sex before you have a colposcopy, unless you have a coil fitted. If this is the case, please use an extra method of contraception for seven days before your appointment, as sometimes it is necessary to remove the coil before you have the treatment.

What happens if I am pregnant or think I might be?

It is important that you keep your colposcopy appointment. A colposcopy can be carried out quite safely during pregnancy, but any investigations will usually be postponed until after the baby is born. When you come for your appointment, we can talk to you more about this.

Will having a colposcopy affect my fertility or sex life?

Having a colposcopy does not affect either of these. However, different treatments may have different effects and we will be happy to discuss this with you at your appointment. If you have treatment, you should avoid having sex for up to four weeks afterwards. If you have a special event coming up (for example, you are getting married or going on holiday very soon after your appointment), please contact the clinic and we will discuss whether it is necessary to rearrange your appointment

Contact details

If you have any more questions about your referral or treatment, phone our clinic to speak to one of our nurse colposcopists on:

City Hospital

0121 507 4246

Sandwell Hospital

0121 507 3249

Further information:

You can find more information on cervical screening on the National Cancer Screening website at: www.cancerscreening.nhs.uk/cervical

City Site

Birmingham Treatment Centre OPD 1

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.

Sources used for the information in this leaflet

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