

Information For You

Colposcopy

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This leaflet aims to answer your questions about having received an invitation for colposcopy following an abnormal smear result. It explains the procedure, risks and benefits; as well as what to expect when you come to the colposcopy clinic.

What does an abnormal cervical smear result mean?

An abnormal cervical smear is not uncommon. About 1 in 12 women have a smear result which shows some abnormality.

An abnormal result means that changes have occurred in the sample of cells that were taken from your cervix (neck of the womb) during the test. Having cervical screening enables changes to be found at an early stage when they can be easily treated.

In many cases the changes will return to normal on their own. However, some of the changes may, in time, develop into cancer. It is uncommon, particularly in women who attend their regular cervical screening, for an abnormal result to show that cancer has already developed.

It is very important that you attend your appointments for further investigation and treatment if necessary. Early diagnosis can help prevent an abnormality from becoming cancer.

What causes abnormal smears and what is HPV?

There are many factors which may be linked to the development of an abnormality. These include certain types of the human papilloma virus (HPV).

*About 4 out of 5 adult men and women (80%) have had an HPV infection at some time in their lives. Infection with HPV can be passed on during sexual intercourse and skin to skin contact of the genital area and often shows no symptoms. Condoms may help to prevent the spread of HPV.

** HPV is the most common viral infection of the reproductive tract.

We also know that smoking affects the cells on the cervix and makes it harder for your immune system to clear the HPV infection.

*Centers for Disease Control and Prevention, authors. Genital HPV Infection Fact Sheet. Rockville, MD: CDC National Prevention Information Network; 2004.

**Weekly epidemiological record. World Health Organisation. May 2017

HPV primary screening test results explained:

Your sample is first tested for HPV (HPV primary screening). If the sample is positive for HPV, the cells are examined for abnormality. You will be referred for colposcopy if abnormal cells are seen.

If you have abnormal results, you may be told you have:

- **Borderline or low-grade dyskaryosis:** You will be offered a colposcopy appointment within six weeks. These changes often will settle on their own over time. Colposcopy will confirm that the changes are indeed low grade.
- **Moderate or severe (high-grade) dyskaryosis:** You will be offered a colposcopy appointment within two weeks. High grade changes often need treatment, which will be offered to you at your colposcopy appointment.
- **Inadequate:** You may be told you need to have a repeat test because the first one could not be tested fully. You will be asked to go back to your GP surgery so another sample of cells can be taken, usually after about three months.

Smoking can make cervical changes occur more rapidly and stopping smoking may be advised by your GP, practice nurse or staff in the colposcopy clinic.

What happens during a colposcopy examination?

You will be seen in the colposcopy clinic which is located in the gynaecology outpatients department.

As this is a University hospital, a medical or nursing professional or trainee may wish to observe the clinic on the day that you are there. We will always ask for your consent (permission) before allowing observations to take place. You can say no at any time, even if you have said yes before, and this will not affect your care in any way.

Before the colposcopy examination:

A clinic nurse will support you throughout your visit. You will be taken to the colposcopy changing area where you will be asked to undress from the waist down. A loose skirt does not need to be removed.

Before the examination, the colposcopist (the doctor performing the colposcopy) will ask you questions about your medical history and explain what to expect from the procedure. If you need a more detailed explanation don't be afraid to ask the doctor or nurse.

The nurse who is looking after you and assisting the colposcopist will then help you to get into a comfortable position on the examination couch with your legs in leg supports.

We recommend that you bring a friend or relative with you for support. They are allowed to accompany you in the examination room if you wish.

Normally 20 minutes is allocated to see each patient, though it may take longer. If this happens there may be a delay in the clinic. The receptionist aims to keep you informed if this is the case.

The examination:

Like a smear test, the doctor will insert a speculum. The colposcope (a magnifying instrument used to locate the abnormal area) does not enter your body but sits between your legs. Your colposcopy should not be more uncomfortable than having a smear test and you should discuss this with the colposcopist. If necessary, the examination could be stopped at any time.

The colposcopist will apply a liquid on the cervix to locate the abnormal area, which may sting a little. After the examination the doctor will tell you what the problem, if any, is and whether you will need a biopsy or treatment.

The biopsy:

The colposcopist may want to take a small sample of tissue from the cervix and send it for further examination to be sure of the diagnosis.

This may feel slightly uncomfortable. Some women say that the biopsy is painless, while others say that it feels sharp, and gives them crampy, period-like pains. This crampy pain often only lasts for a few minutes.

The treatment:

Sometimes treatment will be offered to you at your first colposcopy examination. Not everyone who comes to the colposcopy clinic following an abnormal test will need treatment.

The treatment option that we offer is the loop excision (or “large loop excision of the transformation zone”; LLETZ for short).

Before any treatment, the cervix is numbed with a series of local anaesthetic injections. The rest of the treatment tends to be relatively painless. Please tell the nurse or doctor if you feel any pain, in which case more anaesthetic can be given. There is also an option of having this procedure under general anaesthetic.

The LLETZ treatment is then performed using an electric loop of wire that removes the unhealthy tissue from the cervix. This tissue is then sent to the laboratory to be examined under the microscope.

After the treatment:

Some patients experience mild period cramps which often settle with a painkiller such as paracetamol or non-steroidal anti-inflammatories such as ibuprofen or diclofenac. You will be able to resume your normal activities the day after treatment.

It takes about four weeks for the cervix to heal. We recommend that you don't use tampons, have sexual intercourse or go swimming whilst the cervix is healing. Please inform the nurse or colposcopist looking after you if this would interfere with any prior plans (e.g. a holiday).

You can expect to have a heavy vaginal discharge which should get progressively lighter.

We aim to write to you with the results of the biopsy or tissue removed by LLETZ within four weeks. This letter will have detailed instructions about whether any follow up is required in the colposcopy clinic. Alternatively, the letter may say that you need a smear test at your GP surgery.

What happens if you are pregnant?

It is very important that you keep this appointment so that we can examine your cervix and plan your future care.

The examination does not harm the pregnancy. A biopsy may be taken however, if treatment is required, it would be carried out three months after the baby is born.

What happens if you have a coil?

The coil may need to be removed before LLETZ treatment. It is important that you don't have sexual intercourse for at least one week before your appointment to avoid falling pregnant if the coil is removed.

What effect does treatment have on fertility or future pregnancies?

A single treatment is unlikely to have a significant effect on your fertility.

Recent research shows that certain treatments can increase the risk of going into preterm (early) labour in a future pregnancy.

Your colposcopist will aim to remove as little tissue as possible whilst making sure the treatment is successful.

General Advice

It is recommended that you have something to eat prior to your appointment.

You may wish to take a mild painkiller such as paracetamol two hours before your appointment. We can also provide you with a single dose at the clinic before you go home so please do not hesitate to ask the doctor or the nurse.

We will give you written and verbal information for your follow up care.

If you are unaccompanied, we will ask you to wait for a short while before driving home.

Following a biopsy or treatment we would recommend you arrange to have the rest of the day off work.

If you would like further information please contact the **Colposcopy Clinic on 01493 452363 Monday to Friday 8:30 am to 5:30 pm.**

Useful sources of information

www.bsccp.org.uk/women

www.cancerscreening.nhs.uk/cervical

Feedback

We want your visit to be as comfortable as possible. Please talk to the person in charge if you have any concerns. If the ward/department staff are unable to resolve your concern, please ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care. **Before you leave the hospital you will be asked to complete a Friends and Family Test feedback card.** Providing your feedback is vital in helping to transform NHS services and to support patient choice.

Trust Values

- Courtesy and respect
- A welcoming and positive attitude
- Polite, friendly and interested in people
- Value and respect people as individuals
So people feel **welcome**
- Attentively kind and helpful
- Look out for dignity, privacy & humanity
- Attentive, responsive & take time to help
- Visible presence of staff to provide care
So people feel **cared for**

- Responsive communication
- Listen to people & answer their questions
- Keep people clearly informed
- Involve people
So people feel **in control**
- Effective and professional
- Safe, knowledgeable and reassuring
- Effective care / services from joined up teams
- Organised and timely, looking to improve
So people feel **safe**



The hospital can arrange for an interpreter or person to sign to assist you in communicating effectively with staff during your stay. Please let us know.

For a large print version of this leaflet, contact PALS 01493 453240