

What is a colposcopy?

This leaflet answers the most commonly asked questions about colposcopy. If you have any questions not covered in this leaflet, staff will be able to advise you.

What is a colposcopy?

A colposcopy is a detailed examination of the cervix (neck of the womb). A colposcope is a special magnifying instrument, which allows the doctor or the specialist nurse to get a clear view of the cervix. Sometimes, the vagina and the vulva (the folds of skin outside the vagina) are examined at the same time.

A colposcopy is carried out by a doctor or a specially trained nurse as an outpatient procedure. The colposcopy examination should not cause any pain or discomfort.

Why do I need a colposcopy?

Your recent cervical smear test has shown some abnormalities or pre-cancerous changes. This is not unusual – approximately 1 in 12 cervical smear test results are abnormal. Generally, an abnormal smear test indicates changes in the cells on the cervix. The colposcopy will allow the doctor to examine your cervix in further detail. Samples may be taken from any abnormal areas seen.

Alternatively, your GP may have referred you due to symptoms that could be related to your cervix and require a closer examination.

Does this mean I have cancer?

This is almost certainly not the case. Although abnormal cells rarely turn out to be too serious, it is still important to carry out the examination to make sure that cervical cancer can be either ruled out or treated as soon as possible.

Advice before your appointment

- If you have a period on the day of your appointment, unless it is exceptionally heavy, we can still carry out the colposcopic examination. Please telephone the department if you are unsure.
- If you are trying to get pregnant or do not normally use contraception, there must be no chance of pregnancy, in case treatment is carried out, so you must use reliable contraception.
- If you have a contraceptive coil fitted, please avoid sexual intercourse for 7 days before your appointment or use a barrier method of contraception (condom).
- If you are pregnant, we can still do a colposcopic examination without any risk to your baby. If treatment is required, this can usually be done about three months after your baby is born.

Please bring a sanitary towel or panty liner (not tampons) with you, for use after your examination.

What happens during the examination?

You will be asked to lie down on a couch with your legs supported on special leg rests. The colposcopist will usually apply two different types of solutions onto your cervix, which will highlight any abnormal cells.

A sample of any abnormal tissue, called a biopsy, may be taken. This will be sent to the laboratory for further examination.

Depending on the results, you may need treatment on your cervix. You will be kept fully informed throughout the examination.

A colposcopy can be slightly uncomfortable for some women. If you do find it painful, please tell the colposcopist, who will deal with your discomfort.

Treatment

If a definite abnormality is present and treatment is needed, this can often be carried out with a 'loop excision' on the day. This procedure entails shaving off the abnormal cells using a heated wire loop and in the majority of cases this is carried out after using a local anaesthetic. The procedure lasts a few minutes and is usually successful.

After the examination

After the colposcopy you should feel well enough to continue with your daily routine. You should not have any pain; however, if we take a biopsy you may experience period-like abdominal pain and slight spotting or discharge for a few days. You may also see some brown/grey discharge, due to the solutions used.

If you do experience any pain we suggest you take a mild painkiller such as Paracetamol or Ibuprofen. Avoid sexual intercourse and the use of tampons until the spotting/discharge stops. If you do experience prolonged heavy bleeding or offensive smelling discharge, please contact your GP or the Colposcopy Clinic. Outside of clinic hours, please go to the nearest Emergency Department (A&E).

What happens next?

Before you leave the clinic, the staff will answer any questions you may have and advise you on the appropriate follow-up care. The results of all tissue samples taken usually takes approximately 2-3 weeks to come through. If there is a delay in the lab, the staff will make you aware of this and give an approximate time-frame. Once the doctor has seen them, you will be written to with the results and further management. If further treatment is required, it does not mean you have cancer. Treatment is offered to prevent the possibility of you developing cancer in the future.

Useful contacts

If you would like to discuss your colposcopy visit or have any questions, please contact the clinic on the telephone number below and ask to speak to the Lead Nurse for Colposcopy.

Colposcopy Office: 0118 322 7197 – 0118 322 7283 (Mon – Friday: 8am – 4pm).

Out of hours – Sonning Ward Emergency Clinic: 0118 322 7181.

The Colposcopy Clinic is located on Sonning Ward, Level 5 Maternity Block, Craven Road, Reading. RG1 5AW.

Useful websites

1. www.bsccp.org.uk
2. www.cancerscreening.nhs.uk

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

S Toofany, Colposcopy Clinic, February 2015

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