



Hysteroscopy

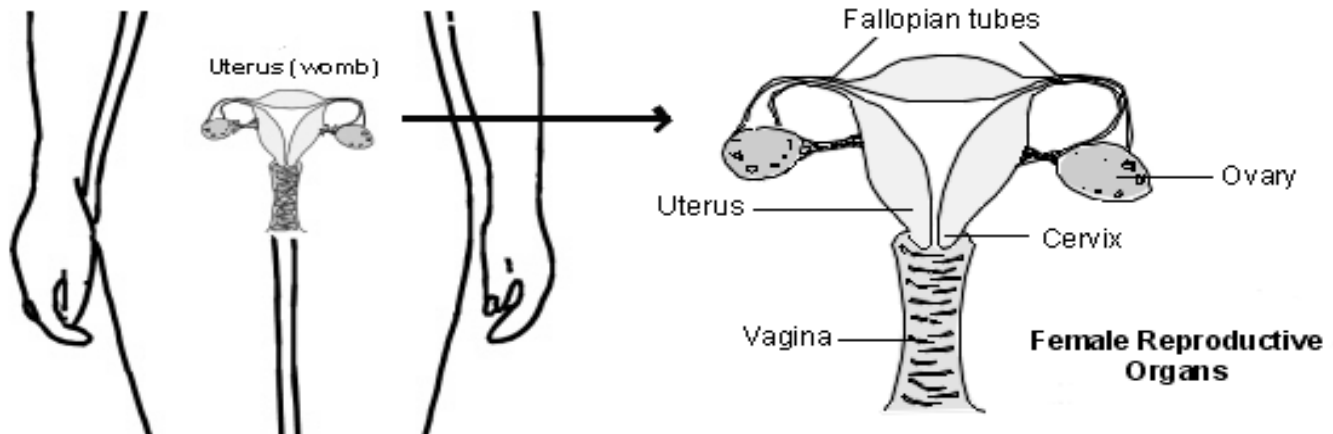
This information is for you if you are planning to have a procedure called a Hysteroscopy as an outpatient

Key points:

- Outpatient Hysteroscopy (OPH) is a simple procedure which involves examination of the womb, with a narrow telescope.
- There are many reasons that you may have been referred for an OPH such as investigation or treatment of abnormal bleeding, removal of a polyp, or removal of a coil.
- The actual procedure usually takes between 5-15 minutes.
- You may experience some discomfort or pain during the procedure in which we recommend that you take some pain relief 1 hour before your appointment. (paracetamol 1G and/ or ibuprofen 400mg if safe to do so)
- You must ensure if it becomes too painful you tell the health care professional to stop, and the procedure will be abandoned and will need to be booked to be done under a general anaesthetic at Good Hope Hospital.
- Local anaesthetic may be used to help reduce the pain if the opening to the cervix is narrow and needs to be dilated.
- There are other options to have the hysteroscopy performed as a day case procedure on another day under general anaesthesia at Good Hope Hospital.
- Risks include pain, feeling faint or sick, bleeding, infection, and uterine perforation (making a false passage which is **very rare**). Uterine perforation is lower in OPH than general anaesthesia.

What is a hysteroscopy?

A Hysteroscopy is a simple procedure which involves the use of a miniature telescope like device to view the inside of your uterus. This device is inserted into the vagina then passed through the neck of the womb into your uterus (womb). The practitioner will then be able to see if there are any problems inside your womb that may need any further investigation or treatment. The hysteroscope has special channels which allow the practitioner to pass various instruments into the uterus. This means that as well as being able to look inside the uterus it allows us to perform other treatments.



Why have I been referred for a Hysteroscopy?

- Very heavy periods
- Bleeding after the menopause (post-menopausal bleeding)
- Bleeding between periods
- Irregular bleeding whilst on hormone replacement therapy
- Removal of a coil when the threads are not visible
- Fertility concerns
- Investigation for any abnormalities inside the womb picked up on an ultra sound scan e.g. polyp or fibroid.
- Investigation prior to performing endometrial ablation if this is being considered for a treatment for heavy periods.

What to do before my appointment?

- Please try and eat normally on the day of your appointment
- It is recommended that you take some painkillers 1 hour before your appointment, Paracetamol (1G) and/or Ibuprofen (400mg) if safe to do so.

Do I need to bring anything with me to the clinic appointment?

- A list of any medication that you are taking
- The date of your last menstrual period, or the date that you went through the menopause
- It may be helpful if someone comes with you to your appointment. Due to covid restrictions they may be asked to wait outside. As per hospital regulations you will be asked to wear a mask.

Do I need to use contraception?

It is important to use contraception or avoid sexual intercourse for at least one week before your appointment. The procedure cannot be performed if there is a chance of pregnancy. You will be asked on arrival to your appointment to provide a urine sample so that a routine pregnancy test can be performed.

Information for Patients

Can I still attend if I am bleeding?

It is best to keep your appointment however if you have any concerns please ring and speak to your health care professional. If you are bleeding heavily the procedure will not be possible to be performed.

Are there any alternatives to having Outpatient Hysteroscopy?

It is possible that you may have this with either a spinal or general anaesthesia. This will be done in an operating theatre most of the time as a day case. You may discuss this option with your health care professional at your appointment. The risks and complications are lower when performed in outpatients opposed to being under a general anaesthetic (being put to sleep).

You may choose not to have the hysteroscopy done at all which is completely acceptable. This can make it sometimes more difficult for the health care professional to find the cause of your symptoms and offer the right treatment for you. They may recommend a scan and a biopsy to find out more or alternatively refer you back to your GP.

What happens during my appointment at Outpatient Hysteroscopy?

On arrival you will present yourself to the reception desk to notify them you have arrived. One of the nursing team will come and greet you and will ask to take your height and weight. You may then be requested to provide a urine sample for a routine pregnancy test (between the ages of 12 -55 years). You will then be seated back in the waiting area until the healthcare professional is ready to see you.

On arrival into the clinic you will meet the health care professional (Doctor or Specialist Nurse) who will further discuss the procedure and ask for your consent. Please use this opportunity to ask any questions you may have.

It is advisable to inform your health care professional if you have:

- Fainted during your periods due to pain
- Have experienced severe pain during a previous vaginal examination
- Have experienced difficult or painful cervical smears
- Do not wish to have this examination whilst you are awake

In order for the hysteroscopy to be performed you will be asked to remove your clothing from below the waist in a private changing room and be given a sheet to wrap around yourself as you return to the examination room. You will be asked to lie on the couch that has special foot rests. Once comfortable the procedure will start sometimes a speculum may need to be inserted into the vagina but this isn't always the case.

There will be 2 -3 members of the nursing team in the room whilst you have your procedure done. One of which will be dedicated to support you throughout your procedure. They will help you get comfortably positioned into a special chair and will keep you covered up as much as possible before beginning the procedure.

The hysteroscope is passed through the cervix to give a clear view inside of your uterus.

Information for Patients

Sterile water is used to enable us to see inside of your womb so you may feel wet as the water trickles back out.

If no abnormality is found, the procedure will only take about 5 - 10 minutes. Sometimes a small biopsy is required from the lining of your womb which is then sent off to the laboratory for examination. The biopsy can be painful (mild crampy pains) if this gets too much please tell your health professional. You will be contacted with the results as soon as these are available usually via post within 4 weeks.

If a polyp is found sometimes it can be removed at the same visit using additional pieces of equipment. You may be offered some local anaesthetic at this point to make you more comfortable. Always tell your healthcare professional if the procedure becomes too uncomfortable. On some occasions the cervix can be too narrow for the hysteroscope and therefore we may put some local anaesthetic into the cervix and use some small instruments to help the hysteroscope pass easily into the womb.

During you OPH your health care professional will view the inside of your uterus on a screen which if you would like you can also watch. Photographs of the findings are taken and stored in your medical notes. Often no abnormality is found and your health care professional will then discuss any further steps for you.

Will Outpatient Hysteroscopy hurt?

For the majority of women hysteroscopy in the outpatient setting is quick and safe and is carried out with little pain/ discomfort. However every woman's experience of pain is very different and it is important if the procedure becomes too painful for you to tell your health professional so that the procedure can be stopped if you wish. Local anaesthetic can be used if the opening to the cervix (cervical os) is narrow and needs to be opened (dilated) using a dilator. Local anaesthetic will prevent pain/discomfort experienced from the pressure of the fluid entering the cavity of the womb.

If you are anxious about your procedure please discuss with your health professional.

What will happen next?

It will usually take 3-6 weeks for your results to be back and reviewed by the medical team. If the result of the biopsy was normal we will not need to see you again in relation to this episode of bleeding. You will receive a letter confirming you have been discharged and back under the care of your GP. A copy of this letter with your results will also be sent to your GP.

How long does the visit take?

The actual procedure may only take 5-15 minutes however the total visit may take up 1-2 hours including your consultation, procedure and recovery time. If polyps are found and removed at the same visit the procedural time maybe a bit longer than 20 minutes (this is due to setting up extra equipment)

How will I feel afterwards?

You may get some period like pain, some spotting or some fresh red bleeding which can last up to a week. These symptoms usually settle very quickly and most women feel they can go back to their normal activities the same day.

Information for Patients

Normal physical activity and sexual intercourse can be resumed when any bleeding and discomfort has settled. You may shower as normal.

If pain relief is needed you can take analgesia such as paracetamol (1g (if you are more than 50kg) every 4- 6 hourly) and/ or ibuprofen (400mg 8 hourly) only if these medications are safe for you to take. Some women take other pain relief medication for painful periods and these can be taken instead if they work for you.

IMPORTANT- If your pain is not controlled by the above medication please contact your healthcare professional.

What are the risks associated with Hysteroscopy?

- **Pain** after OPH is usually mild and similar to period pain. It is usually controlled with simple pain relief medications.
- **Severe pain, feeling or being sick or fainting** can affect a small number of women however these symptoms quickly settle.
- **Bleeding** is usually very mild and is lighter than a period settling within a few days. We recommend using sanitary pads not tampons. If the bleeding does not settle and gets worse you will need to contact your health care practitioner?? Or GP.
- **Infection** is uncommon (1 in every 400 women) this may appear as a smelly discharge fever or severe pain in your tummy. If you develop any of these symptoms you should contact your health care professional immediately. If out of hours present yourself at your emergency department.
- **Failed/unsuccessful Hysteroscopy** occurs if it is not possible to pass the hysteroscope into your womb. Usually this happens if your cervix is tightly closed or scarred. If this happens your health care professional will discuss alternative options with you. It can also be unsuccessful if you find the procedure too uncomfortable and ask for it to stop.
- **Uterine perforation** is rare that a small hole is accidentally made in the wall of the womb which can lead to damage to nearby organs. In diagnostic hysteroscopy this happens in around 1: 1000 cases but the risk is slightly higher for women who have a polyp removed at the same time. In the rare occasion this does happen you may need to stay in hospital overnight usually nothing more is required, however on occasions you may need a further operation to repair the hole.

What will happen after Hysteroscopy?

You can rest in the outpatient clinic recovery area for usually around 20 minutes or longer if needed. You may experience some period type pain which can last for 1-2 days your health professional can discuss options for pain relief with you.

How long will the procedure take?

The examination and sample taken from the lining of your womb takes about 5-10 minutes, but may take longer if a polyp or fibroid is found and needs to be removed.

Information for Patients

We make every effort to keep to the appointment times so your consultation should take no longer than 30 minutes.

How will I feel afterwards?

- You may experience some 'cramp-like' period pains, but painkillers will help
- You will probably feel like resting for the rest of the day
- You will get some bleeding, this may continue for a few days
- If you get any sudden heavy bleeding you should contact your GP

What does endometrial biopsy involve?

A speculum is placed into the vagina (similar to having a smear test) to visualise the cervix, which is then cleaned using some soft gauze and antiseptic. A narrow tube is then passed through the cervix into the womb and facilitates the removal of the cells. This is a simple procedure that generally takes just a few minutes.

How will I feel during and after the biopsy?

Not everyone is the same. You may experience some or no side effects at all.

You may feel some discomfort or period type cramping when this is being performed but as soon as the biopsy is taken the discomfort subsides. If this continues you may take some pain killers such as paracetamol or whatever you normally take.

You may also get a blood stained discharge for a couple of days and should not last any longer than that. It is advisable to avoid tampons and use sanitary pads.

You can go back to work/ resume normal activities following the procedure if you feel well enough. Very occasionally the procedure can make you feel a little light headed, and in this instance the nurse will ask you not to leave the department until you feel well enough to go home.

Complications (very rare but can occur)

- Strong smelling discharge
- Post procedural pain

These symptoms could occur up to 14 days after the biopsy and could be due to an infection, which is easily treated with antibiotics. If you are worried please seek the advice of your GP

For any further information please contact:

Gynaecology Outpatient department

- Good Hope Hospital: 0121 424 9354
- Birmingham Heartlands Hospital: 0121 424 1104
- Solihull Hospital: 0121 424 5382

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email patientexperience@uhb.nhs.uk.