

# Outpatient hysteroscopy

## Gynaecology Department Patient Information Leaflet

### Introduction

This leaflet is for women who are having a procedure called a hysteroscopy. It explains what the procedure involves, what it is used for and its risks.

### What is a hysteroscopy?

A hysteroscopy is a procedure that allows a doctor to make a close examination of the inside of your womb.

### Why is it used?

It can be used to investigate:

- Heavy or irregular periods
- Bleeding between normal periods, after sex or after menopause
- Pelvic pain
- Unusual vaginal discharge
- Repeated miscarriages
- Infertility

## What are the risks of hysteroscopy?

As with all procedures, hysteroscopy carries some risks and complications. It is important that we tell you about these risks so that you have the information you need to make a decision about the procedure.

Occasionally, the womb can be damaged during the procedure. If this occurs, you may need to stay in hospital overnight. In very rare cases, you may need to surgery to repair the damage.

Very rarely, some women experience excessive bleeding after the procedure. If this happens during the procedure, the doctor will treat this at the time by increasing the amount of fluid or gas in the womb. If it happens after the procedure, you may need treatment to stop it.

In a few cases, the womb or cervix can become infected after procedure. This can lead to:

- heavy bleeding
- vaginal discharge that smells or looks unusual
- a fever (temperature over 38°C/100.4°F)
- stomach cramps

If you get any of these symptoms, you will need to visit your GP for advice. You may need to have antibiotics to treat it.

## How do I prepare for the procedure?

To help with any discomfort during or after the procedure, it may help if you take some painkillers such as ibuprofen (if you are able to take it) or paracetamol, about an hour before your appointment (always read the label, do not exceed the recommended dose).

You can eat and drink as normal.

If you will have your period or are bleeding on the day of your appointment, please call **01384 244584** (between 8.30am and 5pm) to discuss this as sometimes the appointment may need to be rearranged.

It may be a good idea to arrange for someone to drive you home after the procedure. If this is not possible, you may be asked to stay in the Outpatient Department longer, to make sure you are ready to drive.

## **What will happen at the appointment?**

You will be called in to see the doctor who will take some details from you and explain the procedure. You will then be taken through to the changing room. You will need to remove the clothes on the lower half of your body and wrap a sheet around yourself. The nurses will help you get into the right position on our special couch that has supports for your legs.

There will be two nurses present throughout the examination. One will be assisting the doctor and the other will stand beside you to support you and answer any questions you might have.

### **The procedure**

The doctor will use a speculum which is the same instrument used in a cervical screening (smear) test). This is used so that they can see your cervix (neck of the womb) clearly. You may be given some local anaesthetic to numb your cervix.

A narrow telescope is then passed through the cervix and into your womb. This telescope is connected to a special camera that allows the doctor to see a picture from the inside of your womb on a television screen. You can choose if you wish to look at the screen yourself. Fluid will be used to stretch your womb slightly to ensure the doctor can see the inside clearly.

A small sample of the lining of the womb (endometrial biopsy) is often taken at this time and sent to the laboratory to be examined more closely.

At the end of the procedure, the nurses will assist you to sit up and make sure you do not feel dizzy or lightheaded before you get dressed.

## What can I expect after a hysteroscopy?

You may experience some cramping pains, similar to period pains, for a few days after the procedure. Pain-relieving drugs such as paracetamol, or ibuprofen if you can take it, should relieve this (always read the label, do not exceed the recommended dose). If the pain does not go away or gets worse, see your GP.

You may experience some bleeding for a few days. It should not be heavy. If the bleeding becomes heavy (with clots) or starts to smell unusual, you should contact your GP as this may mean you have an infection.

Use sanitary pads, not tampons, during this time to help reduce the risk of infection.

Hysteroscopy is not a treatment. Your symptoms should not be any better or worse after the procedure.

## How will I find out the results?

The doctor will then see you again to discuss your results and any treatment options which may be appropriate. If a biopsy has been taken, it may be necessary to wait for the results of this before a follow up appointment is made.

## Can I find out more?

You can find out more from the following web link:

### **NHS Choices**

<http://www.nhs.uk/Conditions/Hysteroscopy/Pages/Introduction.aspx>

Leaflets cannot take the place of talks with health professionals. If there is anything you do not understand, you are concerned about any part of the procedure, or are worried afterwards, contact:

Gynaecology Outpatient Team on 01384 244584 (8.30am to 5pm, Monday to Friday)

**This leaflet can be downloaded or printed from:**

<http://dudleygroup.nhs.uk/services-and-wards/obstetrics-and-gynaecology/>

**This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.**

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此宣传单可提供大字版本、音频版本和其它语言版本，请拨打电话：0800 073 0510。

Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru va rugăm sunați la 0800 073 0510.

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