

Colposcopy and cervical biopsy

Colposcopy

Colposcopy is examining the cervix with a microscope and bright light. Sometimes a biopsy (small sample of skin/cells from the cervix) is also taken in order to obtain more information.

Reasons for colposcopy include abnormal cells found on a screening test (cervical screening test, CST, or what used to be called a Pap Smear), bleeding after sex, a discharge, or an abnormal looking cervix. If certain types of hpv (16 or 18) are found on a CST, colposcopy is also recommended.

When will I see receive my results?

At the conclusion of the examination I will tell you my findings but the full results will take around one week. The results will be fed back to you and to your referring doctor and I will make a recommendation regarding follow up or the need for treatment.

Preparation

You can have the examination done if you have your period unless it is very heavy. If you take aspirin or fish oil tablets please stop taking them one week before the examination. Do not use vaginal creams such as Oveston or Canesten from the night before. If you think you could be pregnant or your period is late let Dr. Thomas know. Colposcopy is safe during pregnancy although a biopsy is generally not performed in pregnancy.

The examination

During the colposcopy you will lie on an examination couch, a speculum is inserted as for a normal CST. Usually 5% acetic acid (similar to vinegar) or an iodine solution painted onto the cervix with a cotton stick which helps to highlight abnormal cells if present. A biopsy may be taken (a flake of skin about 2x2mm), this occasionally causes a mild period like cramping and the specimen obtained is then sent to the laboratory for examination by the pathologists.

After the colposcopy

There may be a little bleeding after the colposcopy, certainly not more than a period. I apply silver nitrate or Monsel's paste to seal any bleeding points. These may give you a slight black to grey discharge. Most women are able to return to school or work immediately after a colposcopy. Some women have mild pain or cramping but this usually goes away within one to two hours. You may take Panadol or Panadeine or Nurofen or similar if you wish.

Adverse effects

Rarely the cervical biopsy triggers a fainting response which may make you feel faint, nauseated or sweaty. This will only last a few minutes and generally occurs immediately after the examination. If you feel that you may faint, please tell me without delay.

Occasionally insufficient detail is obtained from the colposcopy and another might be required, possibly under anesthetic.

When to seek advice after a colposcopy

1. Heavy vaginal bleeding (soaking through a large pad in an hour or two for two hours).
2. Vaginal bleeding for more than seven days.
3. Foul smelling discharge.
4. Pelvic pain and cramps that did not improve with ibuprofen and Panadol.
5. Temperature greater than 38 degrees.

What happens next?

If needed, the most common treatment is a wire loop excision (LLETZ). This requires a general anaesthetic in hospital. Some minor problems such as HPV or Low Grade Change simply need a follow up CST at more frequent intervals. I may request that you have Pap smears more frequently. See the notes regarding colposcopy and LLETZ on my website.

Summary

Abnormal cervical screening tests and HPV are common! A colposcopy is a confirmatory examination conducted in the office. Treatment for cervical abnormalities does not require a hysterectomy in the vast majority of simple cases and does not affect fertility. It is extremely unlikely that you will have cervical cancer, remember colposcopy and the cervical screening programme are designed to prevent this.

Paging service for urgent matters, 9387-1000.

