

# The Colposcopy Examination

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## **Colposcopy**

## **Patient Information Leaflet**

You have been asked to come for a colposcopy examination where you will be seen by a specially trained doctor or nurse known as a colposcopist.

## **Why do I need a colposcopy examination?**

There are several reasons why you may have been asked to come for a colposcopy examination:

### **Abnormal cells**

Abnormal cells on the cervix (neck of the womb) are very common. About 1 in 20 screening samples are abnormal. An abnormal result usually means that small changes have been found in the cells on the cervix.

These abnormal changes are known as 'dyskaryosis' and act as early warning signals that cervical cancer might develop in the future. It is important to remember that it is very rare for these abnormalities to be cancer.

It has been found that the main cause for abnormal cells is a virus called Human Papilloma Virus (HPV), although other factors, especially smoking, can also increase the risk of cell abnormality.

HPV is a very common virus and most women will become infected at some point in their lives. HPV is consequence of normal sexual activity, skin to skin sexual contact. HPV detection does not indicate that your partner has been unfaithful. At present there is no treatment for HPV and it normally takes up to two years for it to clear on its own.

For some women the abnormal cell changes in the cervix return to normal by themselves. Other women will need some simple outpatient treatment which is successful in about 95% of cases.

### **Inadequate results following your cervical screening**

This means that the sample taken of your cervical cells could not be analysed properly. There may not be enough cells collected, or the cells may have been hidden by blood or mucus. If you have had three consecutive inadequate results from your screening tests, you will be referred to colposcopy so that a colposcopist can check your cervix.

### **Other signs and symptoms**

Rarely, you may have had a normal screening result but there are other clinical signs and/or symptoms that indicate colposcopy would be advisable.

## **What is colposcopy?**

Colposcopy is a simple examination of your cervix. The examination allows the colposcopist to confirm the presence of abnormal cells and allows an assessment of the severity of the changes so that, if needed, appropriate treatment can be offered.

The instrument used is called a colposcope. This is a special type of microscope that magnifies the cervix so that it can be closely examined and any abnormalities can be detected. A speculum, the instrument used to take a cervical smear, is placed into the vagina while the colposcope remains outside of the body. For most women the colposcopy examination is painless, but some may find it a little bit uncomfortable.

Colposcopy examination can be done safely during pregnancy and will not affect the delivery of your baby, nor will it affect your ability to become pregnant in the future. However, any treatment would usually be postponed until the delivery of your baby.

## **Is there anything I can do before the examination?**

University Hospitals of Morecambe Bay is a teaching hospital trust, which means that we may have a visiting doctor, nurse, or medical/nursing student in clinic. We will ask permission for them to stay while you are being examined, and will respect your decision if you do not want them to be present.

You are welcome to bring with you a relative or friend to your colposcopy appointment and if you wish they can stay with you during the examination.

If you have a period on the day of your appointment this is usually not a problem unless it is very heavy. If you feel particularly awkward about being examined with a period, please contact us to make another appointment. The actual examination only takes about 15 minutes, but allow at least half an hour for the whole visit. You may find wearing a loose-fitting skirt, or long top and trousers to your appointment more convenient.

Some women have a slight discharge after the examination. You may want to bring a sanitary towel just in case.

## **What happens before the examination?**

First you will be invited into the consultation room by the colposcopist who will ask you some questions. These questions relate to your periods, the type of contraception you use, and any operations or illnesses you have had in the past, among others.

You will then be taken into the examination room where you will be asked to undress from the waist down (if you wear a skirt, this does not need to be removed). You will be given privacy and time for this.

## **What exactly happens during the examination?**

The colposcopy nurse will ask you to take a seat on the examination couch, and provide you with a modesty sheet. The couch has padded supports on it where you rest your legs. The colposcopy nurse will help you position yourself correctly. When you are lying comfortably,

the colposcopist will gently insert a speculum into the vagina. This is the same instrument used when you have a smear test.

Sometimes another sample of cervical cells is taken. After this the colposcopist will look at your cervix using the colposcope (microscope).

The colposcopist will dab different liquids onto the cervix to help identify and highlight any areas of abnormal cells. Abnormal areas will appear white. If any abnormal area is identified, a small sample of tissue (a biopsy) will be taken from the surface of the cervix. A biopsy is about the size of a pinhead. You may feel a slight stinging, but it should not be painful.

After the examination has taken place the colposcopy nurse will ask you to get up and dressed in your own time, giving you privacy to do so.

## **What happens after the examination?**

After you have dressed, the colposcopist may be able to tell you if anything is wrong and what treatment, if any, is needed. But often (especially if you have a biopsy) you will not be given a definite diagnosis immediately after the examination. We will write to you with the result of the biopsy as soon as we receive it. This will take approximately four weeks. After the examination you should feel well enough to continue with your usual routine.

If you have had a biopsy, you may well have a light blood stained discharge for a few days following the procedure. We will provide you with a panty liner just in case. This is normal and it should clear itself. However, it is best to avoid intercourse for up to five days to allow the biopsy site to heal and avoid infection.

## **What will the examination show?**

Colposcopy defines the type and extent of the abnormal area on the cervix. The results show if you need treatment and if so, what sort. The results of the biopsy show how abnormal the area is. It may also indicate if further treatment is needed.

The technical term used to refer to cell changes confirmed by a biopsy is cervical intra-epithelial neoplasia (CIN). It is these changes which, in some women, may develop into cancer if the cells are not treated.

CIN is mainly caused by certain types of HPV. HPV is a group of more than 100 viruses, and certain types of it are associated with around 95% of all cases of cervical cancer. However, most HPV infections have no symptoms and will disappear without any need for treatment. Even women with 'high risk' HPV's (the type which can cause abnormalities of the cervix) rarely go on to develop cancer.

CIN changes are described using a scale of 1 to 3, according to how deeply the abnormal cells are found in the surface layer of the cervix.

**CIN 1** means that only 1/3rd of the thickness of the surface layer of the cervix is affected. These cells may be left to return to normal or may be treated, depending on your doctor's opinion.

**CIN 2** means that up to 2/3rds of the thickness of the surface layer contains abnormal cells. Treatment will usually be needed to return the cells to normal.

**CIN 3** means that the cells throughout the thickness of the surface layer are abnormal. Treatment will be needed to return the cells to normal.

Only very rarely will a biopsy show cell changes that have already developed into cancer. Surgery and more extensive treatments are generally used to treat cervical cancer.

## **What if I need treatment?**

The colposcopy clinics all offer a 'see and treat' policy. This means that, following examination, you may be offered treatment on your first visit under local anaesthetic.

The aim of the treatment is to destroy or remove all the cells affected by CIN with the minimum of disruption to normal tissue. This decision to treat on the day is between you and the colposcopist. If you prefer to come back for treatment at a later date, this is your choice and you will be given another appointment in due course.

A leaflet explaining what such treatment involves will be enclosed.

The Colposcopy Clinic Team would be more than happy to answer any questions / queries you may have. Please contact the numbers below and ask to speak to a member of the Colposcopy Clinic Team:

Claire Thornton / Lynda Jackson at Royal Lancaster Infirmary and Westmorland General: **01524 512338**

Sarah Mason / Pat Nicholson at Furness General: **01229 403616**

**(Monday – Friday: 8:30am-4:30pm)**

Out of clinic and surgery hours, we advise you to contact:

Ward 16 Gynaecology at Royal Lancaster Infirmary: **01524 583820**

Ward 1 Gynaecology at Furness General: **01229 870870** (internal extension: 54107)

## **Useful Websites**

British Society for Colposcopy and Cervical Pathology -[www.bsccp.org](http://www.bsccp.org) Healthtalkonline - [www.healthtalkonline.org](http://www.healthtalkonline.org)

Jo's Cervical Cancer Trust -[www.jostrust.org.uk](http://www.jostrust.org.uk) NHS Choices - [www.nhs.uk](http://www.nhs.uk)

Cancer Research UK – [www.cruk.org](http://www.cruk.org)

Cancer Screening NHS - [www.cancerscreening.nhs.uk](http://www.cancerscreening.nhs.uk)

## **Helpline**

Jo's Cervical Cancer Trust offers a listening ear for those seeking support and information about cervical abnormalities and positive screening results.  
Call: 0808 802 8000

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## **Other formats**

If you would like to receive this information in an alternative format, then please contact : 01539 795497.

## **Travelling to our hospitals**

For the best way to plan your journey visit our website:  
<http://www.UHMB.nhs.uk/> or contact Patient Advice and Liaison Service (PALS): 01539 795497.

## **Useful Contact Details**

NHS 111 (for 24 hour urgent health advice): telephone 111

## **Your Information**

If you would like to know how we use, share, disclose and secure your information and your rights of access to the information we hold about you, visit the Trust's website: <http://www.UHMB.nhs.uk/> or contact Patient Advice and Liaison Service (PALS) on 01539 795497.

## **Evidence**

Details of the evidence used in writing this leaflet are available on request from: Patient Information Officer at 01524 512476.

## **Feedback**

We appreciate and encourage feedback. If you need advice or are concerned about any aspect of care or treatment, please speak to a member of staff or contact PALS on 01539 795497.

UHMBT is a no smoking Trust. Smoking is not permitted on any of the hospital sites. You can contact the NHS North Lancashire Stop Smoking services on the number below:

NHS Quit Squad - **0800 328 6297**

If you live in Cumbria, please call **0300 013 3000** to find a local pharmacy who are offers 1-2-1 support and nicotine replacement therapy.

*University Hospitals of Morecambe Bay Trust: a great place to be cared for; a great place to work.*