

Having a hysteroscopy and biopsy or polyp removal from your womb (general anaesthetic)

Department of Gynaecology

Information for Patients

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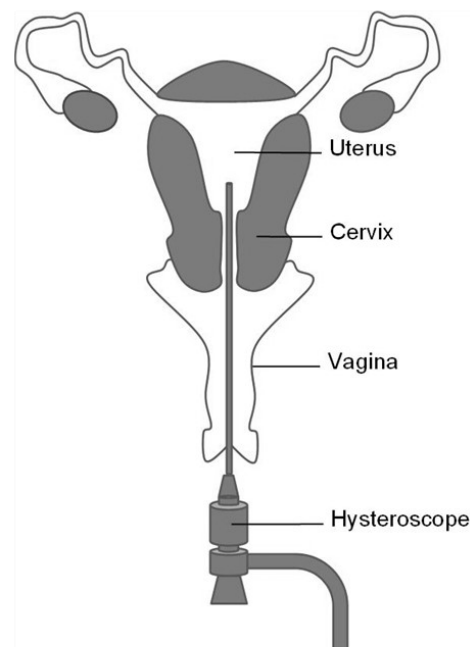
What is a hysteroscopy?

A hysteroscopy is a procedure using a small telescope with a camera attached (hysteroscope) to look inside the womb (uterus).

Why do I need a hysteroscopy?

A hysteroscopy may be used to try and find the cause of various problems such as:

- heavy or irregular periods or bleeding between periods.
- bleeding after sex.
- bleeding after menopause.
- irregular bleeding whilst taking hormone replacement therapy (HRT).
- unusual fluid or mucus (vaginal discharge) that hasn't improved after other treatment.
- scar tissue in the uterus.
- fertility problems.



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These problems may be due to:

- thinning of the lining of the womb (uterus).
- fleshy growths (polyps) from the lining of the womb. These are usually non-cancerous.
- growths (fibroids) in the muscle wall of the womb. These are usually non-cancerous.
- heavy periods around the time of the menopause.
- in a small number of cases, bleeding problems are related to pre-cancerous or cancerous changes.

Are there any risks?

As with any procedure, there are possible risks. These include:

- infection - this happens in around 2 to 5 out of every 100 women having a hysteroscopy.
- damage to the womb (uterus) or neck of the womb (cervix) - this happens in around 1 in every 200 women which may rarely lead to damage of the bowels, bladder or blood vessels.
- heavy bleeding - this happens in around 1 out of 400 women.
- cramps or pain after the procedure.

Sometimes it is not possible to complete the procedure as planned. If the procedure is not successful, the doctor will talk to you about any further investigations that may be recommended.

Before the procedure

- Please ask a friend or relative to drive you home after the procedure. We recommend that you do not drive for 24 hours after general anaesthetic.
- Contraception - it is important that there is no risk of you being pregnant at the time of your hysteroscopy. **Therefore please use effective contraception from the start of your period (if you still have them) before the procedure, up until the day of the procedure.**
- If you are bleeding too much it may not be possible to see well enough to complete the procedure so contact the admissions ward if you think this will be a problem.

During the procedure

The procedure usually takes about 20 minutes. You will have a general anaesthetic and be asleep during the procedure.

The hysteroscope is passed through the vagina and cervix into the uterus. A small amount of saline water is used to open the womb and allow a clear view of the womb lining.

The neck of the womb will then be gently stretched to take a tissue sample (biopsy) with a small straw or by scraping the lining of the uterus using an instrument called a curette (this is commonly known as a dilatation and curettage (D&C) procedure).

If a polyp is seen inside the womb, this will be gently grasped and twisted off or scraped off. All the tissue samples are sent to the laboratory to be examined under a microscope.

After the procedure

You may feel some 'period-like' pain for 1 or 2 days after the procedure. We recommend you take regular pain relief. You can carry out all your normal activities including work, lifting and exercise as long as you are comfortable. You may drive if you are comfortable doing so after 24 hours.

You may have some slight bleeding for 1 to 2 weeks. We recommend that you wear a panty liner or pad during this time. To reduce the risk of infection, please do not use tampons during your next period. Do not have sex for 7 days at least or until the discharge/ bleeding has stopped completely.

Contact your GP if you develop any problems such as:

- a temperature.
- increased and unexplained pain which does not improve by taking painkillers.
- increased vaginal discharge which is smelly and unpleasant.
- heavy bleeding.

Getting the results

Once the procedure is completed, the doctor will let you know what they have seen inside your womb.

They will write to you and your GP with the results of any tissue samples taken. If your procedure is to rule out cancer, you will be contacted within 3 weeks with the results. Otherwise you will be given the results in the following 4 to 6 weeks.

What if I am not able to attend my appointment for this procedure?

It is very important that you attend your appointment. However, if you cannot attend please let us know so your appointment can be given to someone else. We can then arrange another appointment for you.

If your appointment is at Leicester General Hospital (LGH), please call 0116 258 4821.

If your appointment is at Leicester Royal Infirmary (LRI), please call 0116 258 6747.

Please allow plenty of time for parking. For maps, bus and car parking information visit www.leicestershospitals.nhs.uk/patients/getting-to-hospital or ask for a leaflet.

If your appointment is at Loughborough Hospital please call 01509 564406 .

If your appointment is at Melton Mowbray Hospital please call 01664 854904

If your appointment is at Hinckley Hospital please call 01455 441845.

Please allow plenty of time for parking. For maps, bus and car parking information visit

<https://www.leicspart.nhs.uk/services/locations/?v=12902>

If you have any questions, write them down here to remind you what to ask when you speak to your nurse/ consultant/ doctor:

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો.

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਸਿ ਹੋਰ ਭਾਸ਼ਾ ਵੱਲਿ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਰਿਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

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