Out-patient hysteroscopy

Information for patients
Important
If there is any chance you may be pregnant please tell a member of the team immediately.

We will not be able to perform a hysteroscopy if you are pregnant. Please avoid unprotected intercourse (use a condom) in the cycle of your appointment. You may be asked to provide a urine sample for pregnancy testing when you attend for your hysteroscopy.
This sheet answers common questions about hysteroscopy. If you would like further information, or have any particular worries, please do not hesitate to ask your nurse or doctor.

In all cases, a doctor will explain the procedure to you and answer any questions you may have.

In most cases it will be possible for a friend or relative to accompany you during your consultation; however it may not be possible for them to accompany you during your procedure but please ask your nurse or doctor.
What is a hysteroscopy?
A hysteroscopy is an examination of the inside of the uterus (womb) using a fine telescope (a hysteroscope, with the outer diameter only a few millimetres). The telescope is inserted via the vagina and opening of the uterus (cervix). A small video camera allows an image from the telescope to be seen on a television screen. The inside of the uterus can be assessed in terms of its shape, the lining (endometrium) and for focal lesions (polyps, fibroids, septa, adhesions). This can help identify the cause of the symptoms listed below. A small biopsy (removal of a few cells from the endometrium) is often done at the end of the procedure to allow further analysis under a microscope. We can sometimes remove polyps and small fibroids as well. The procedure is relatively simple and takes a few minutes. It can be easily performed as an out-patient procedure without general anaesthetic. Some women benefit from local anaesthetic injections into the cervix to numb the area, but most patients do not need this and in our experience, the injections can be more uncomfortable than the hysteroscopy.

Why is a hysteroscopy performed?
Women who are experiencing certain gynaecological symptoms relating to their womb (uterus) are often recommended to undergo a hysteroscopy. Some of the more common complaints include:
- Heavy or irregular periods
- Bleeding between periods or after the menopause
• Fibroids
• Unusual vaginal discharge
• Repeated miscarriages
• Problems with fertility
• To insert or remove coils

Are there any side-effects or complications from a hysteroscopy?
A hysteroscopy is a very safe procedure with a low risk of complications. The most common side effects are discomfort (similar to period pain), feeling faint and bleeding. Very rarely, the hysteroscope may cause injury by passing through the wall of the uterus (perforation). If this occurs you may require some further treatment. There is a small risk of infection but this is rare.

You should contact your GP or A&E if following the procedure you develop:
• A temperature
• Increased pain, not relieved with your usual painkillers
• Increased discharge which is smelly and unpleasant
• Heavy bleeding

Before your hysteroscopy
No preparation is needed before a hysteroscopy. You can eat and drink normally before coming in. If you wish you can take the usual tablets that you would use for
pain relief (eg paracetamol) about an hour before your appointment time. You may be asked to provide a urine sample for a pregnancy test. Hysteroscopies can be performed during a period, however please call for advice prior to your appointment.

**What happens during a hysteroscopy?**
You will be asked to remove the bottom half of your clothing and lie on a couch with your legs in leg supports. A speculum may be placed inside the vagina, similar to when you have a cervical smear. Sometimes we have to gently stretch (dilate) the cervix a few millimetres to allow the hysteroscope to be inserted, but this is the exception rather than the rule. If you wish, you can watch the procedure on a screen.

**After your hysteroscopy**
We will ask you to stay in the waiting area until you feel ready to leave. You may get period like cramps during or after the procedure, but many women only feel little discomfort. Very occasionally, women can feel a little faint or nauseated, in which case they can lie down until they feel better. It is usual to have some light bleeding after a hysteroscopy and you might need to wear a sanitary towel for a few days. There is no reason why you should not drive home, but it would be just as well to take things easy for the day. You should be able to return to work the following day, as well as resume normal activities such as sport and sexual intercourse.
**When will I know the results?**
We will discuss the findings and their implications with you following your hysteroscopy. We can usually suggest a treatment plan and often no further appointments are needed. If you do require additional investigations or surgery, we will arrange this for you. The results of any biopsies usually take 2 weeks and then we will write to you and your GP with the outcome.

**If you have any further questions please contact:**
**Barnet Hospital**
Hysteroscopy Coordinator
Tel: 020 8216 5406

**Chase Farm Hospital**
Hysteroscopy Coordinator
Tel: 020 8216 5406

**Royal Free Hospital**
Sister Charlotte Miller
Tel: 020 7830 2495