

Patient information

Hysteroscopy (as an outpatient)

What is a hysteroscopy?

Hysteroscopy is a procedure used to examine the inside of the uterus (womb).

It is carried out using a hysteroscope. This is a narrow telescope connected to a screen on which the doctor can view images from the inside of the womb.

Hysteroscopy is a common procedure that is carried out as an outpatient. This means that you do not have to stay in hospital overnight.

Why is a hysteroscopy used?

A hysteroscopy is recommended as a diagnostic test in women with symptoms suggesting a possible abnormality of the womb.

Symptoms could include:

- Heavy or irregular menstrual bleeding
- Bleeding after the menopause or after sexual intercourse
- Repeated miscarriage
- Sub-fertility
- Persistent vaginal discharge

Hysteroscopy is also sometimes used to assist with fitting or removal of coils such as Mirena IUS.

What happens during an outpatient hysteroscopy?

A speculum is used to gently open the vagina (similar to when a cervical smear test is performed). The doctor inserts the hysteroscope into the vagina, through the cervix, into the uterus (womb).

Local anaesthetic can be used to numb the area and help to minimise discomfort during the procedure.

It may be necessary to take a specimen from the lining of the womb during the hysteroscopy. This is called an endometrial biopsy. Your doctor will inform you if you need to have an endometrial biopsy.

A hysteroscopy usually takes around 10 - 20 minutes to perform.

You should ensure that there is no chance of pregnancy prior to your hysteroscopy. If you think you might be pregnant please inform us as soon as you arrive.

Risks of the procedure

This is a safe procedure with a low risk of complications. The most commonly reported complications are:

- Infection
- Excessive bleeding
- Accidental perforation of the uterus (making a hole in that wall of the womb). This is not usually serious but may require further treatment to correct.

Recovering from a hysteroscopy

- Some women will experience cramping similar to period pains after a hysteroscopy. We recommend you have simple painkillers such as paracetamol or ibuprofen available at home to take if needed.
- You may experience some vaginal bleeding or a discharge for a few days following the procedure.
- Use external sanitary towels, **not tampons**, to reduce the risk of infection and to allow healing to take place.
- You should avoid sexual intercourse until any bleeding has stopped.
- Do not douche (wash out) or use any internal vaginal products.
- Most women feel they can return to normal activities, such as work, the day after the procedure.
- You may drive following the procedure.

Results

We will write to you and your GP with the results from this investigation.

If an endometrial biopsy was performed the specimen is sent to the laboratory for further investigation and results may take up to 4 weeks.

You should contact your GP if:

- You have severe abdominal pain
- You have heavy vaginal bleeding especially if it contains clots of blood
- There is a vaginal (smelly) discharge

If you require any further advice, please contact the Martin Corke Day Surgery Unit on 01284 713050 between 7.45am and 8.00pm, Monday to Friday.

Or the Gynaecology Nurse on 01284 713601 during office hours.

Outside of these hours contact the gynaecology ward on 01284 713235 / 713236 and speak to the nurse in charge. Please have your hospital number on the discharge letter available.

or contact NHS 111

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo) <https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



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