

Colposcopy

What is a colposcopy?

A colposcopy is a close examination of a woman's cervix using a special microscope called a colposcope. The colposcope can also be used to examine for abnormal cells in the woman's genital tract, either inside or on the outside of the vagina. Your healthcare provider may recommend you have a colposcopy after an abnormal Pap smear or due to symptoms such as bleeding from the cervix. A colposcopy is a more accurate diagnostic test because the healthcare provider can have a closer look at the cervix to assess whether further treatment is required. If a problem is seen during the colposcopy, a small sample of tissue (biopsy) may be taken from the cervix or from inside the opening of the cervix (endocervical canal). The sample is sent to an outside lab for evaluation. The results of the biopsy can take approximately 7-10 days.

Why is it done?

- Look at the cervix for problem areas when a Pap smear was abnormal
- Check a sore or other problem (such as genital warts)
- Cervix looks abnormal during a pelvic exam
- When previous tests reveal you have HPV (Human Papillomavirus)
- You have unexplained bleeding or other problems
- Follow-up from a previous abnormal colposcopy finding

How to prepare

Tell your healthcare provider if you:

- Are pregnant or might be pregnant. **All patients are required to take a pregnancy test prior to the procedure.**
- Are taking any medications
- Are allergic to any medications
- Have bleeding problems or take blood thinners (aspirin, warfarin)
- Have been treated for a vaginal, cervical, or pelvic infection
- Have gone through menopause

Other preparations:

- Read this sheet carefully
- Schedule the test for a time when you are not menstruating heavily
- Do not douche, use tampons, have sexual intercourse or take vaginal medications for 24 to 48 hours prior to the exam
- Take a mild over-the-counter pain reliever before the test such as Ibuprofen (if no allergies). **DO NOT TAKE ASPIRIN.**

How it is done

The procedure is usually done by a gynecologist, a family medicine physician, or a nurse practitioner who has been trained to do the test. The procedure typically takes 10 to 20 minutes. Clothes below the waist will have to be removed and you will be given a covering drape around your waist. You'll lie on your back on a table with your feet in supports, just as during a pelvic exam or Pap test.

The healthcare provider places a speculum in your vagina. The speculum holds open the walls of your vagina so that the healthcare provider can see your cervix. The healthcare provider positions the special magnifying instrument, called a colposcope, a few inches away from your vulva. A bright light is shined into your vagina, and the healthcare provider looks through the lens, as if using binoculars.

Your cervix and vagina are swabbed with cotton to clear away any mucus. The healthcare provider may apply a solution of vinegar or another type of solution to the area. This may cause a burning or tingling sensation. The solution helps highlight any areas of suspicious cells.

If the healthcare provider finds an abnormal area, a small sample of tissue may be collected for laboratory testing. To collect the tissue, the healthcare provider uses a sharp biopsy instrument to remove a small piece of tissue. If there are multiple suspicious areas, the healthcare provider may take multiple biopsy samples.

If a sample of tissue is needed from inside the opening of the cervix (the endocervical canal), a test called endocervical curettage (ECC) will be done. Since the endocervical canal cannot be seen by the colposcope, a small tool called a curette is gently put into the endocervical canal to take a sample. ECC takes less than a minute to do and may cause mild cramping.

If bleeding does occur, a special liquid (Monsel's) or silver nitrate swab may be used on the biopsy area to stop the bleeding.

After the Test

After you have a colposcopy, your vagina may feel a little sore for a couple of days. If you had a biopsy, you may also have spotting or dark-colored vaginal discharge. Use a pad, panty-liner, or tampon — unless your healthcare provider tells you not to use tampons.

Here are some other things to keep in mind after your colposcopy and biopsy:

- You can shower or bathe as soon as you want
- If you didn't have a biopsy, you can have vaginal sex whenever you want
- If you did have a biopsy, wait about one week to have vaginal sex or douche to allow healing
- Do not exercise for one day after your colposcopy
- If you take any medications, continue taking them as usual — including your birth control
- Tell any sex partners if your biopsies show you have HPV

Risks

In rare cases, a cervical biopsy can cause an infection or bleeding. Bleeding can usually be stopped by using a special liquid (Monsel's) or silver nitrate swab on the area.

Call your healthcare provider if you have:

- Bleeding that's heavier than spotting — unless you think it's your period
- Fever or chills
- Heavy, yellow-colored, or bad-smelling discharge from your vagina
- Severe pain in the lower part of your belly

Results

Your healthcare provider will talk to you about what they see at the time of the colposcopy. Lab results from a biopsy may take 7-10 days. The results will determine your need for treatment and the Pap smear follow-up schedule. **It is very important to maintain the Pap smear follow-up schedule that is recommended post colposcopy by your healthcare provider.**

If your healthcare provider finds abnormal cells, you might not need to do anything right away. Sometimes, you'll need more tests or treatments - it depends on how abnormal your cervical cells are.

Your healthcare provider may recommend waiting to see if the cells heal themselves. In this case, you'll have another Pap smear and maybe other tests to watch the cells.

Sometimes, your biopsy is also your treatment. That's because your healthcare provider may be able to remove all of your abnormal cells during the biopsy. If so, you won't need any more treatment. You'll go back to having annual pelvic exams, Pap smears, and/or HPV tests. Your healthcare provider will tell you how often you need to have these.

Or you might also need further treatment. There are 4 procedures that are very good at removing the abnormal cells and preventing cervical cancer:

- Cryotherapy: abnormal cells are frozen off
- LEEP: abnormal cells are removed using a thin wire loop that carries an electrical current
- Laser: abnormal cells are removed using a laser
- Cone biopsy: a cone-shaped wedge is cut out of your cervix to remove the abnormal cells

Finally

- It is very important to maintain the Pap smear follow-up schedule that is recommended post colposcopy by your healthcare provider
- Smoking greatly increases your chance of developing cervical cancer. Second hand smoke is also a risk. Now is a good time to cut down and stop smoking.
- A diet of high fruits and vegetables supplies your body with the fuel to fight abnormalities and heal itself. Five fruits and vegetables a day are recommended.
- Take a multivitamin that includes folic acid and beta-carotenes
- Follow SAFER SEX practices whenever you start a new relationship to protect yourself from all STDs
- Charges for the procedure will be discussed with you prior to the colposcopy. There is a down payment required and you may work out a payment plan for the remainder of balances.

Your colposcopy has been scheduled with _____ at _____

Date _____ Time _____

Please eat a nutritious meal before the procedure to decrease the chance of fainting and also Ibuprofen 800 mg orally (if no allergies) prior to the procedure to decrease cramping.

References:

Planned Parenthood. Cervical Cancer. <https://www.plannedparenthood.org/learn/cancer/cervical-cancer/what-colposcopy>

Northside Gynecology. Colposcopy Information Sheet. <https://www.northsidegynaecology.com.au/wp-content/uploads/2017/08/Colposcopy-Information-Sheet-1.pdf>

Mayo Clinic Staff. Colposcopy. <https://www.mayoclinic.org/tests-procedures/colposcopy/about/pac-20385036>