

Colposcopy Information Sheet

What is a colposcopy?

A colposcopy is a close examination of a woman's cervix (or neck of womb) 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 health care provider may recommend you have a colposcopy after an abnormal Cervical Screening Test (CST), or due to symptoms such as bleeding from the cervix. CST's are screening tests for changes in the cells of the cervix. A colposcopy is a more accurate diagnostic test because the doctor can have a closer look at the cervix to assess whether further treatment is required.



What preparation is needed before colposcopy?

Colposcopy cannot be performed while you are having your period. Some women experience cramping (like period pains) during the colposcopy. You may find it helpful to take a painkiller an hour before the procedure to minimise discomfort.

How is colposcopy done?

- Having a colposcopy is similar to having a CST but will take about 15 minutes.
- First a speculum is inserted into the vagina.
- Often the doctor will take a CST.
- The colposcope is placed at the entrance to the vagina. The doctor then looks at the cervix through the colposcope. The colposcope magnifies the cervix 15-30 times.
- A weak vinegar solution is then applied to the cervix. When the cervix is painted like this, areas where there are changes in the cells turn white. Healthy cells stay pink.
- If the cervical tissues stain white, then the doctor may perform a biopsy (the removal of tiny pieces of tissue) from any areas of concern.
- Biopsies generally are not painful. The tissue collected is sent to a laboratory for testing to determine if treatment is necessary.
- Sometimes a brown solution (Iodine) is applied to view your cervix under different light. During this examination healthy cells turn brown. This brown solution contains iodine and may produce a brown discharge for a few days after the procedure. You need to tell the doctor or nurse if you are allergic to iodine.

What should I do after the procedure?

- You may want to wear a pad for a few days to prevent staining of your underwear by the iodine solution.
- It is best to avoid heavy physical exercise for 24 hours after a biopsy and it is best not to have penetrative sexual intercourse for about a week.
- To prevent infections, avoid swimming, bathing and spas for 3 days.
- If a biopsy is taken, some extra discomfort may be experienced for a short time.
- In general, you will not need time off work after a colposcopy.

These precautions are to reduce the risk of bleeding or infection. Please contact your doctor if you have any heavy bleeding, fever or offensive vaginal discharge.

Obtaining results, follow up care and referral

It is important that you see the doctor for follow up care after the colposcopy. At this visit the doctor will explain what was seen and how you will get your results. Depending on your results and after discussing the result with you, the doctor may recommend:

- more frequent CSTs
- repeating the colposcopy for follow-up or
- other treatment.

What treatments are available?

Your treatment will depend on whether an abnormality was detected and if so, the type of abnormality detected. Changes in the cells are treated by removing them. Sometimes the doctor may treat the abnormality while you are having your colposcopy. In other cases another follow up appointment will be arranged and the doctor will discuss further treatment options with you.

Common types of treatment

- LLETZ (large loop excision of the transformation zone). This treatment uses a wire loop to remove the abnormal cells
- Cone Biopsy is where a small cone shaped area of the cervix containing the abnormal cells is removed surgically in hospital under general anaesthetic
- Less common treatments are Laser or Diathermy and Cryosurgery, which use heat or cold to remove abnormal cells. Your doctor will discuss these in more detail if recommended for you.

Looking after yourself

- It is important that you discuss your follow up with the doctor before going home
- You will have some bloodstained discharge for a couple of days, followed by spotting which may last for a couple of weeks. It is best to wait until the spotting has stopped before you resume sexual intercourse
- You will probably be advised to have a CST in 12 months time
- Having regular CSTs in the future is very important to maintaining your health
- Taking time to look after yourself includes a healthy diet, doing some exercise, getting enough sleep and not smoking. These basic lifestyle modifications are the best way to stay healthy and well.

For more information and advice

- Talk to your General Practitioner or Mobile Women's Health Nurse
- Gynaecological Outpatients at your local hospital
- Cancer Council Queensland Help Line - 13 11 20
- [National Cervical Screening Program's website](#) - 13 15 56
- [National Cancer Screening Register](#) – 1800 627 701

Please contact us on 1300 780 138 if you have any questions.