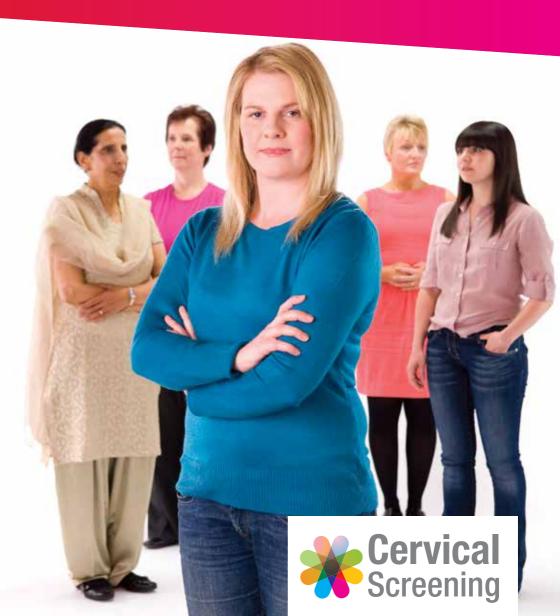
Cervical screening: the colposcopy examination





You've been asked to go for a further examination because your cervical screening has shown some cell changes on your cervix. These changes act as early warning signals that cervical cancer may develop in the future. It is important to remember that it is very rare for these changes to be cancer.



What is a colposcopy?

A colposcopy is a simple examination of the cervix using a colposcope (a type of magnifying glass). It lets the doctor or specialist nurse look more closely at the changes on your cervix to decide if you need treatment. The examination is similar to the screening test, so some women may find it a bit uncomfortable.

Colposcopy may be done safely during pregnancy, although treatment may be delayed until after your baby has been delivered. Colposcopy will not affect your ability to get pregnant in the future.



🧲 Should I prepare in advance?

Some doctors and specialist nurses prefer not to do a colposcopy during your period. Your appointment letter will tell you how to rearrange your appointment, if necessary.

The examination takes only 15 minutes but you will need to allow up to an hour for your whole visit. You may bring a friend or relative with you.

For your own comfort, you may want to wear a loose skirt to your appointment. You will then have to remove only your underwear for the examination.

Some women have a slight discharge or bleeding after the examination. You may want to bring a sanitary pad just in case.



What happens before the examination?

First, the doctor or specialist nurse will want to ask you some questions. These will relate to your periods, the type of contraception you use, and any operations or illnesses you have had in the past. It is particularly helpful if you can remember the date of the first day of your last period before attending the clinic.



What happens during the examination?

If not wearing a skirt, you will be asked to undress from the waist down and to position yourself on a special couch which has padded supports for your legs. A nurse will be with you during the examination.

The doctor or specialist nurse will gently insert a speculum into your vagina, just like your initial screening test. Sometimes a repeat test will be carried out. Then the specialist will examine your cervix using the colposcope. This looks like a pair of binoculars on a stand and does not touch you or go inside you.

The specialist will dab liquids onto your cervix to highlight any areas of cell changes more clearly. A small sample of tissue (a biopsy) may be taken from the surface of the affected area. This may sting a little but it should not be painful.





The specialist may be able to tell you immediately what they have found and what treatment, if any, is needed. You may be given another appointment to come back to discuss the results of any biopsy and any treatment you may need.

After the examination, you should feel well enough to continue with your usual routine. If you've had a biopsy, you may have a light bloodstained discharge for a few days but this is nothing to worry about. You should not have sex for up to five days to allow the biopsy site to heal. Do not use tampons until the discharge clears up.



What will the examination show?

The colposcopy and any biopsy results will show the type and extent of the cell changes on the cervix. This will show if you need treatment and, if so, what sort. Only very rarely will a biopsy show cell changes that have already developed into cancer. Surgery and other treatments are generally used to treat cervical cancer.



What if I need treatment?

Any treatment you may require is usually simple and can mostly be done under a local anaesthetic as an outpatient. The choice of treatment will depend on your particular case. Treatment may be carried out at your first visit, but in some cases you may have to come back to the clinic for your treatment.



After treatment, you may have a bloodstained discharge for six to eight weeks. During this time, when you have your period you need to use sanitary pads rather than tampons. It is also best to avoid heavy exercise and not to have sex. This will allow the cervix to heal as quickly as possible.



Treatment of cervical cell changes will not affect your ability to get pregnant. However, some type of treatments may increase your risk of having a premature baby in the future. The doctor or specialist nurse will explain the risks of your treatment in detail.



Around six months after treatment you will be offered cervical screening again to check that your treatment has been successful. If your result shows no changes to your cells, or minor changes to your cells, your sample will then be tested for human papillomavirus (HPV). This is known as the **test of cure**. If this test comes back negative for HPV, you will be at very low risk of ongoing cervical disease at that point in time, but it will be important that you attend for screening again in three years time.

If the cervical screening result shows changes which require further investigation, or if the HPV test comes back positive, you will be referred for another colposcopy.

Although one in five women will be invited back for another colposcopy, only a few will need treated again. This is because it can take longer than six months for your immune system to clear HPV after treatment.



The Northern Ireland cervical screening programme regularly reviews screening records to monitor and improve the quality of the programme and the expertise of specialist staff. Staff working for the programme may see and review your records. Any information relating to you will remain strictly confidential.

We may review your previous screening results if you are diagnosed with cervical cancer. You will be able to see the results of this audit if you wish.

If you need more information on how your records are kept and used, the contact details for the screening programme can be found at www.cancerscreening.hscni.net

Further information

If you have any further questions on your condition or treatment, do not hesitate to discuss these with your GP or colposcopy clinic. They will be happy to help you.

For more information, or this leaflet in another language or format, visit: www.cancerscreening.hscni.net



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