

## Patient Information Leaflet for Hysteroscopy

Your G.P. has arranged for you to have a hysteroscopy in the outpatient clinic. A hysteroscopy is a camera test to examine the inside of your womb. During the examination we will also take a sample of tissue (biopsy).

It is important that you let us know if you are on a heavy period as the test cannot be done. If you are bleeding on the day of your appointment, please ring the hysteroscopy service on 01274 364496 for further advice.

### **What precautions do you need to take prior to attending for your outpatient hysteroscopy (OPH) appointment?**

- If you are trying for a baby or having a coil removed, please abstain from sexual intercourse or use contraception from your last period until your hysteroscopy, as the test cannot be performed if there is any chance of pregnancy
- If you are currently taking tablets like provera (hormone treatment) to help with the heavy menstrual bleeding, please continue until the day of the test
- You may feel pain or discomfort during a hysteroscopy. It is recommended that you take pain relief (400mg of ibuprofen or 1 gram of paracetamol or whatever pain relief you find useful for period pain) at least 1 hour before your appointment. If you feel very nervous or anxious your GP can also prescribe Diazepam tablet to be taken prior to the test
- On the day of your appointment, you can eat and drink normally, there is no need to fast.

### **Booking in for your appointment on the day**

**If you have been sent an appointment for an ultrasound scan to be done before you are seen by the hysteroscopy team:**

Please book in with the reception team on Level 1, in the Women and Newborn Unit, at the Bradford Royal Infirmary to let a member of staff know you have arrived. You will be giving directions to the Ultrasound Department on Level 0 or on level 3 where you will be having your ultrasound.

After your ultrasound appointment please make your way to the Women's Health Unit, on Level 3 for your hysteroscopy appointment.

## **If you do not have a scan appointment:**

Please proceed to the Women's Health Unit, Level 3 in the Women and Newborn Unit at the Bradford Royal Infirmary.

You may bring a relative or friend with you if you wish. **Please note you may be at the hospital for up to 4 hours for this appointment.**

## **Who works in the service?**

- **Hysteroscopist** – this person performs the hysteroscopy. They may be a female or male, a trained doctor or a specialist nurse. If you have any preferences, please ring the hysteroscopy service on 01274 364496
- **A nurse** – they will explain the test to you and will give you the information on after care.
- **2 other nurses** – one will be helping the hysteroscopist in the clinic room and the other will stay with you during the test and make you a drink afterwards

If you would like to speak to a nurse specialist before attending or if you have questions after the test you can ring 01274 364895 to leave a message on the answerphone. Please leave your name and contact number and the nurses will aim to get back to you as soon as possible.

## **What will happen during the OPH?**

- You will be seen by a member of staff who will explain the procedure to you and they will get your written consent to confirm that you are happy for the hysteroscopy to go ahead.
- You will be asked to lay on a special couch with your legs in stirrups to help with the test.
- A very thin telescope, using water, is used to examine the vagina (front passage), cervix (neck of the womb) and the inside of the womb. Sometimes a speculum (instrument used to take a smear test) may need to be used.
- If you find the procedure uncomfortable or if the test requires the neck of the womb to be dilated (opened with a very fine instrument), local anaesthetic injections may be used to numb the area in the cervix.
- The telescope is connected to a camera and TV screen and you may choose to look if you want.
- A tiny piece of tissue will be taken from the womb lining (biopsy) and this will be sent to the laboratory. A choice of coil insertion may be discussed as a treatment of heavy menstrual bleeding.
- Water is used to give a clear view; you might feel this trickling out during the test.
- The hysteroscopy takes about 5-10 minutes. At some stages, during the procedure, you may feel a period-like discomfort but many women feel nothing at all.
- Sometimes polyps (simple skin tags) are found. It may be possible to remove small polyps during the test, if so; the hysteroscopy may take another 10 minutes.
- Gas and air will also be offered as a method of pain relief, if used we advise you not to drive for at least 30 minutes after the procedure.

## **What happens afterwards and how will I feel?**

You will be offered refreshments and the nurse will talk to you about the results of your hysteroscopy and the next step in your treatment. You should feel well enough to go home and back to work if you wish.

## **How do I get my results?**

You will be told after your procedure how and when you are likely to receive your results. If you have not received either written or telephone communication within 6 to 8 weeks please contact the team on 01274 364496.

## **What are the most common findings?**

- In many cases we find no serious cause for the bleeding
- Polyps – these are simple skin tags inside the womb or on the cervix
- Fibroids – these are smooth muscle lumps in the muscle of the womb

## **What are the possible risks with an OPH?**

- Pain during or after OPH is usually mild and similar to period pain. Simple pain relief medications can help. On occasion, women may experience severe pain
- Feeling or being sick or fainting can affect a small number of women. However these symptoms usually settle
- Bleeding is usually very mild and is lighter than a period, this should settle within a few days of the hysteroscopy
- Infection is uncommon (1 in 400 women). It may appear as smelly discharge, fever or severe pain in the tummy
- Failed / unsuccessful OPH occurs if it is not possible to pass the hysteroscopy inside your uterus. Usually this happens when the cervix is tightly closed or scarred
- Damage to the wall of the uterus (uterine perforation) – rarely a small hole is accidentally made in the wall of the uterus, this could also cause damage to nearby tissues. This happens in less than 1 in 1000 diagnostic hysteroscopy procedures. It may sometimes mean that you may have to stay in hospital overnight. Usually nothing more needs to be done, but you may need a further operation to repair the hole

## **Are there any alternatives to attending as an outpatient?**

You may choose to have your hysteroscopy with either a general or spinal anaesthetic. This will be done in an operating theatre, usually as a day case procedure. The risks and complications are lower when hysteroscopy is done as an outpatient procedure rather than under anaesthesia.

## Further Information

You can also read the Royal College of Obstetricians and Gynaecologists patient information leaflet for further information. Visit their website:

<https://www.rcog.org.uk/for-the-public/browse-our-patient-information/outpatient-hysteroscopy/>

## What have other patients thought?

When asked, 97% said they would be happy to have their hysteroscopy done this way again.

### These are some comments from women who have had a hysteroscopy:

- *"Quick, efficient, painless, on the spot diagnosis".*
- *"The explanation of what was going to happen and getting the results straight away really put me at ease"*
- *"I knew what was happening step by step, which was very reassuring".*
- *"Reassurance that there was no serious problem to worry about"*

## People with hearing and speech difficulties

You can contact us using the Relay UK app. Textphone users will need to dial 18001 before the number to be contacted.

## Accessible Information

If you need this information in another format or language, please ask a member of staff.

**Smoking:** Bradford Teaching Hospitals NHS Foundation Trust is a smoke-free organisation. You are not permitted to smoke or use e-cigarettes in any of the hospital buildings or grounds.

## Wristbands

When you are in hospital it is essential to wear a wristband at all times to make sure you are safe during your stay. The wristband will show accurate details about you on it including all the information that staff need to identify you correctly and give you the right care.

If you do not have a wristband whilst in hospital, then please ask a member of staff for one. If it comes off or is uncomfortable, ask a member of staff to replace it.