

A hysteroscopy is a test where a fine telescope about 3 mm wide is inserted through the neck of the womb to look inside the womb and check its lining and the opening of the tubes. Your womb is usually filled up with fluid so the doctor can perform a thorough check. The procedure lasts between 10-15 minutes but your appointment may last about 30 minutes in all.

Outpatient means this test does not require you to have general anaesthetic. You are awake and may have some local anaesthetic if needed. You go home after the procedure.

You do not need to bring someone with you but are most welcome to do so.

There are various reasons why you may have been offered this test and you need to discuss it with your doctor/nurse in the clinic. We usually perform this test to check for any abnormalities inside the womb such as polyps (non cancerous growth inside the womb), fibroids, lost contraceptive coils, abnormal womb shapes and cancer.

If you are on a period

The test may be difficult during a period as blood stops the doctor from seeing inside the womb clearly. However, it may be that your test needs to be done despite your period. We would recommend you discuss the fact that you are having a period during your visit with the clinic doctor/nurse.

Before the test

You do not need any special preparations before this test. You can continue eating and drinking as usual. It may be helpful to have simple painkillers such as paracetamol, co-codamol or ibuprofen 30 minutes before your appointment to reduce discomfort during the procedure.

During the test

You will have plenty of time to discuss any queries with the doctor or nurse during your appointment. If you are happy to proceed with the test, you will be advised to change into one of our gowns.

The nurse will help you lie on the examination couch and the doctor may pass a speculum just like in a smear test. You may also be given local anaesthetic through a very fine needle into the neck of your womb. This is not usually painful. Sometimes the neck of the womb may need to be dilated to allow the telescope to be inserted.

The fine telescope is passed through the cervix and fluid is used to show the lining of the womb. You can watch the procedure on the TV screen if you wish. You may be advised a biopsy of the lining of the womb or removal of a polyp by the doctor. This will be discussed with you and taken during the procedure with your consent.

After the test

You may have to stay for about 20 minutes in the clinic after the procedure to ensure you have made a good recovery. It is very rare to have to stay longer or overnight.

You may experience period type cramps for the rest of the day. You may wish to take pain killers such as paracetamol, co-codamol or ibuprofen.

You may also have vaginal bleeding for 24-48 hours. This usually gets lighter and completely stops in about a week. You must avoid tampons and only use sanitary towels. You must also avoid sexual intercourse until the bleeding has completely stopped. If you have had treatment performed at the same time then your doctor/nurse will advise you about aftercare.

Driving

You may drive as you have not had a general anaesthetic however you need to make sure you feel well before driving. It may be better to arrange for someone else to pick you up if possible.

Going back to work

Most women prefer not to go back to work on the day of the procedure. It is probably better to avoid any strenuous work such as gardening, vacuuming or exercising at the gym on that day. You should be able to resume your normal daily activities the next day.

Risks

An outpatient hysteroscopy is a very safe procedure especially as you do not require a general anaesthetic.

Frequent effects

Some women complain of cramps and discomfort during the procedure. This is due to the fluid used and does not last long. It usually gets better 10-30 minutes after the procedure. Most women have slight bleeding and discharge for a few days after the procedure. This usually improves on its own. Occasionally the bleeding or discharge may persist and become foul smelling. We recommend you see your GP to check for signs of infection and have antibiotics if necessary.

Rare effects

A few women feel lightheaded and dizzy during the procedure. This is rare and may happen if the neck of the womb was difficult to dilate. We usually stop the procedure and you feel better in 10-15 minutes.

Uncommon effects (affects 2 in 1000 women)

It is very rare during an outpatient procedure to damage the womb by making a hole in the muscles. This is called perforation. It may happen if the neck of the womb is difficult to dilate to pass the telescope or if the womb is very thin and small especially after the menopause. If this has happened, you may be advised to stay in hospital overnight and have antibiotics.

Alternatives to this test

This test can be performed under general anaesthetic. Please discuss this with the doctor/nurse in the clinic if you think this will suit you better. Sometimes an ultrasound scan may be able to give you information about your symptoms and we would encourage you to discuss this with your doctor/nurse if this has not already been performed.

Further information

For more information or if you have any queries please telephone Orchard Gynaecology ward on 01234 792219 or the gynaecology outpatients department on 01234 79200. You may also like to visit the RCOG website at: www.rcog.org.uk.

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