



Understanding Colposcopy

PATIENT EDUCATION SERIES

What is colposcopy?

Colposcopy is a method of taking a closer look at the cervix and vagina. The instrument used is called a colposcope, which resembles a microscope. It can magnify approximately 10 times the normal size. Your medical provider may also use the scope to take a sample of tissue.

How is colposcopy performed?

Most often colposcopy is performed in a clinic or office setting by a physician and a specially trained nurse practitioner or physician assistant. The procedure is done on a regular gyn exam table. A speculum is inserted, allowing the cervix to come into view. The colposcope is positioned outside the vaginal opening and never directly touches the woman's body. This exam feels the same as a routine gyn exam. However, it is often necessary to perform a biopsy, or sampling of tissue, at the same time. This part of the exam is described differently by women who have experienced it. Some report no or little sensation, while for others there is mild to moderate cramping or a sharp pinch. No anesthesia is required, but ibuprofen is often given prior to the procedure to help with cramping.

When is it recommended?

Colposcopy is generally recommended for women who have had an abnormal pap smear. Most commonly, a diagnosis of atypical cells on the cervix has been made, requiring a closer look at the cervix. Persistent high risk types of human papilloma virus on the cervix may also require colposcopy. It is also suggested for DES-exposed daughters as a screening test or to follow those women who show DES-related changes.

Occasionally, during a pelvic examination an irregularity in the cervix or vaginal wall is noted that requires colposcopic examination. Any condition that required colposcopic examination in the past may call for a follow-up examination at future intervals suggested by your provider. It is also possible that your Pap smears will be done more frequently over the next year or more to ensure that your problem remains under control.

How do I prepare for colposcopy?

The procedure takes about 15 minutes to perform and does not require admission to a hospital. It is scheduled between menstrual periods.

Do not douche or use any vaginal or contraceptive creams, jellies, or foam for at least 24 hours prior to your appointment. If you have an obvious vaginal infection with abnormal discharge, it should be evaluated and treated before your appointment.

What are the risks of colposcopy?

- Very low rate of infection
- Bleeding
- Possible discomfort similar to menstrual cramps

How do I take care of myself after the procedure?

- 1) Your medical provider may have applied a medication to the biopsy site(s) to stop any bleeding. Do not be alarmed by a brownish-black vaginal discharge. This is due to the medication and is to be expected. It may last up to 1 week.
- 2) It is common to have some spotting similar to the spotting that occurs during the last 2 days of your menstrual period. This discharge is from the biopsy site(s) and will stop when healing is complete (usually within 4 to 7 days).
- 3) Call your medical provider if the following occurs:
 - Bleeding greater than one sanitary napkin/hour
 - Spotting longer than 7 days
 - Bright red bleeding
 - Temperature greater than 100 degrees F
- 4) To allow the cervix to heal:
 - No sexual activity or douching while spotting or as directed by the gyn specialist.
 - When healing is complete, sexual activity may be resumed with preferred method of STI prevention and/or birth control. If you use a hormonal birth control method, continue your daily schedule without interruption during this healing process.
- 5) Use sanitary pads rather than tampons for any spotting or if your menstrual period should begin during the healing process (4 to 7 days).