

Colposcopy

A colposcopy is a detailed examination of the cervix (neck of the womb); it is also used to check the vulva (area outside the vagina). The examination uses magnification and a strong light from the colposcope that sits outside the body and shines onto the cervix.

Who needs a colposcopy?

This may be recommended by your health care professional in several situations – for a woman with:

- A cervical screening test (Pap) that suggests a significant change in the cells on the cervix
- Symptoms of unusual bleeding or discharge such as between periods, after sex, or after menopause
- Persistent symptoms (such as irritation) or a skin change (colour change, new skin change or growth) on the vulva

Who performs a colposcopy?

A colposcopy will be performed by a health professional who has specific training and accreditation to do this (gynaecologists; specially trained GPs; at some True clinics – see web-site)

How is colposcopy performed?

- This will take approximately 15 minutes
- A speculum is placed into the vagina (similar to having a Pap test) to hold the vaginal walls open and enable the cervix to be seen
- The colposcope is positioned outside the vagina and the light directed onto the cervix. The doctor is able to look through binoculars on the colposcope to see the cervix under magnification
- The cervix is then washed with a weak vinegar solution. Any cells showing a change will be identified as white while the normal cells stay pink. The colour change goes back to normal in 1-2 minutes.
- The doctor looks for patterns in

the white area made by fine blood vessels to assess the type of changes. This directs the doctor to areas that should be biopsied (a tiny sample taken) to send to the laboratory for more information. Biopsies are momentarily uncomfortable.

- An iodine solution may also be applied to the cervix – this causes different colour changes for the doctor to assess

What happens after a colposcopy?

If a biopsy is taken (and this is not always necessary), the doctor may apply a brown solution to stop any bleeding. This may give a yellow/brown coffee - ground discharge that may last a day or two and require you to wear a panty-liner

You will be given an instruction sheet for your care over the next week

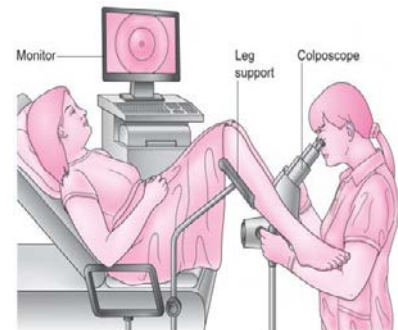
The doctor will arrange with you how you would like to receive the results of any test (Pap test, biopsy) that have been taken

A follow up plan will be made with you

Will I need more tests or treatment?

The findings at colposcopy and from samples taken will determine the next step. This may include:

- Returning to your regular doctor for another Pap test
- Returning for a follow up colposcopy
- Treatment to remove a change on the cervix



Treatments

There are different treatments depending on the change on the cervix, the woman's stage in life, and the woman's preferences.

One of the common treatments is called a LLETZ (large loop excision of the transformation zone). This may be performed under a local or general anaesthetic. The procedure uses a fine heated wire to remove the area of tissue containing the change. The area removed is then checked by the laboratory for completeness and to confirm the changes.

If treatment is required your doctor will discuss the options and provide all the information that you would need to make a decision.

Disclaimer

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Reference:

Cromer BA et al. DMP and bone mineral density in adolescents--the Black Box Warning: a Position Paper of the Society for Adolescent Medicine. J Adolesc Health 2006; 39:296.