

A guide to Outpatient Hysteroscopy

What is an outpatient hysteroscopy?

An outpatient hysteroscopy is an examination of the inside of the uterus (womb) using a fine telescope without the need for general anaesthetic.

Who is an outpatient hysteroscopy for?

An outpatient hysteroscopy is suitable for women who have:

- Bleeding after menopause
- Bleeding between periods
- Heavy periods
- Missing IUD/ coil threads
- Small polyps
- Breakthrough bleeding on HRT / the contraceptive pill

What does an outpatient hysteroscopy involve?

The procedure is performed in a treatment room in the clinic and lasts between 5 and 30 minutes.

A hysteroscope (a small thin light filled tube with a camera) is inserted into the vagina and passes through the cervix. The camera sends images to an external monitor so the consultant can review them.

A small sample (biopsy) from the lining is taken and sent for analysis. Small polyps can be removed if necessary, coils can also be removed or inserted at this time.

As there is no general anaesthesia you can go home 30 minutes or so after the procedure.

What happens during the procedure?

A nurse will always be present with you throughout your procedure. You will be asked to remove the bottom half of your clothing and lie on a couch with your legs in leg supports. A speculum may be placed inside the vagina, similar to what happens in a cervical smear. If you wish, you can watch the procedure on a screen.

A fine telescope is inserted via the vagina and opening of the uterus (cervix) and using water, the telescope passes through the birth canal and into the womb.

The inside of the womb can then be seen and assessed in terms of its shape, the lining (endometrium) and for focal lesions (polyps, fibroids, septa, adhesions).

A small biopsy (removal of cells from the endometrium – lining of the womb) is often done at the end of the procedure to allow further analysis under a microscope.

How to prepare for an outpatient hysteroscopy

- It is advisable that you take a painkiller (such as paracetamol 1g or ibuprofen 400mg) 30 minutes prior to the procedure.
- You can eat and drink as normal before the procedure.
- You may be asked to provide a urine sample for a pregnancy test. Also, hysteroscopies can be performed during a period, however it is worth discussing this with the doctor for advice beforehand.
- Finally, bring someone with you, even if you prefer to be alone during the procedure it is helpful to have someone to take you home.

Is the procedure painful?

An outpatient hysteroscopy can be uncomfortable and therefore women may wish to take paracetamol or ibuprofen 30 minutes before the procedure.

It may be necessary to insert local anaesthesia into the cervix if a gentle stretch (dilatation) is required to allow the hysteroscope to be inserted.

What can I expect afterwards?

Afterwards, you may experience period like cramps and some bleeding (like a light period) and you may feel faint.

When can I get the results of my outpatient hysteroscopy?

The results are often available within 5-7 days.

What are the risks of an outpatient hysteroscopy?

A hysteroscopy is a very safe procedure with a low risk of complications.

The most common side effects are discomfort (similar to period pain), feeling faint and bleeding. You should contact the clinician or seek other medical advice.

How long after the procedure should I wait before going home?

As there is no general anaesthesia you can go home 30 minutes or so after the procedure.

How quickly can I return to work?

After the procedure you could return to work the same day although it would not be unreasonable to take the day off.

How much does it cost?

The procedure should be covered by private health insurance policies.

If you are self pay please visit our website below.

www.london-gynaecology.com/self-pay-packages/outpatient-hysteroscopy/



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