• **Perforation of the uterus** - if this occurs there may be a risk of damage to the bowel, cervix, urinary tract or major blood vessel. It may be necessary to check for injury using a laparoscope (keyhole surgery) or by laparotomy (incision in the abdomen). This occurs in 1-2:1000

• Failure to gain entry to the uterus and complete the procedure.

What should I look out for?

If you have any of the following see your GP as soon as possible or contact NHS ${\bf 111}$:

- Heavy vaginal bleeding
- Offensive smelling discharge or bleeding
- Persistent lower abdominal or pelvic pain that is difficult to manage with simple painkillers.
- Temperature

Useful contacts

Harbourside Gynaecology Centre, Poole Hospital is open from Monday to Thursday, from 8:30am to 5pm and on Friday, from 8:30am to 3pm.

Phone numbers: **0300 019 2584** or **0300 019 2651**. You can leave a message and your call will be returned as soon as possible.

Gynaecology Nurse Practitioners, Royal Bournemouth Hospital, Mon-Fri 8am - 4pm and ansaphone out of hours

Phone number: 0300 019 4725.

The Royal Bournemouth Hospital, Castle Lane East, Bournemouth, Dorset, BH7 7DW

Poole Hospital, Longfleet Road, Poole, Dorset, BH15 2JB

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This leaflet is intended to give you information about your hysteroscopy and what to expect during and after the procedure

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Hysteroscopy



University Hospitals Dorset

NHS Foundation Trust

What is a hysteroscopy?

A hysteroscopy is an examination procedure that is used to look inside the cavity of the uterus (womb). It is performed using a very fine telescope, called a hysteroscope, which has a camera at the end. The telescope is similar in size to the writing tip of a ballpoint pen. The camera transmits images to a monitor for the doctor or specialist nurse to be able to inspect the endometrium (womb lining).

Why might I need a hysteroscopy?

Your consultant may suggest this procedure to investigate symptoms such as postmenopausal or irregular bleeding problems. This examination can be used to inspect the womb lining for changes that may be causing your bleeding. Also, it is possible to see polyps (fleshy tags) that can be removed. Often the procedure will not change your symptoms but can give information to diagnose your problem.

How is this procedure performed?

A hysteroscopy can be carried out under general anaesthetic and may require an overnight stay. This may occur if there is difficulty performing the procedure in outpatient clinic under a local anaesthetic. The hysteroscope is introduced into the uterus (womb) through the vagina and the cervix (neck of the womb). Sterile salt water solution is fed through the hysteroscope to make it easier to pass it into the cervix and to help open the uterus (womb) to enable good views.

How can I prepare for this procedure?

A hysteroscopy can be a little uncomfortable and cause crampy stomach pains, therefore we recommend that you take some simple painkillers e.g paracetamol, and/or ibuprofen at least 1 hour beforehand.

What happens during a hysteroscopy?

This procedure is performed under a general anaesthetic as a day case procedure but can involve an overnight stay.

- The hysteroscope will be passed into the uterus through the vagina and cervix.
- A small sample of the womb lining may be taken during the procedure. This can then be sent to the laboratory for testing.
- Polyps, if found, can also be removed at this time.
- This is quite a wet procedure due to the water solution being fed through the scope.

What might I expect after hysteroscopy?

- You may experience crampy type lower abdominal pain, similar to period pain.
- You will be provided with simple pain killers such as Paracetamol and/or Ibruprofen after surgery if required.
- You will have a watery discharge after the procedure.
- You may experience some bleeding, particularly if you have had a polyp removed, but this should not be heavy and should settle in a couple of days.

Getting back to normal

- When discharged home you will need to arrange for someone to drive you home.
- if discharged home on the same day you will need a relative or friend to stay with you for the first 24 hours.]
- If discharged home on the same day it is advisable to go home and rest immediately after the procedure but you can resume normal activities after 24 hours.
- Avoid sex for a few days and use sanitary towels and not tampons until you are comfortable or until bleeding has stopped.
- If tissue samples have been taken, it can take a few weeks to get the results. These will be sent out by letter along with any further management plan, if required.
- Please understand that we are unable to give results over the telephone.

What are the risks and complications of a hysteroscopy?

According to research, the complication rate is far lower for diagnostic hysteroscopy procedures than for other operative procedures. However, there are potential risks and complications:

- **Bleeding** This may require a blood transfusion and /or return to theatre. If severe a hysterectomy may be required.
- Infection this will usually present as an offensive discharge and may require treatment using antibiotics