

Hysteroscopy and Endometrial Polypectomy

This leaflet has been produced to help explain your operation and recovery.

What is an endometrial polyp?

A polyp is a fleshy tag of tissue and these can appear on the cervix (neck of the uterus) or within the cavity of the uterus (womb). Polyps are normally nothing to worry about, however they may need removing if they cause problems such as excessive bleeding, bleeding between periods or after sexual intercourse.

What is the treatment for an endometrial polyp?

It is now possible to remove a polyp within in the cavity of the uterus without a general anaesthetic although this is not always an option and often a GA is required. The procedure is done as a day case procedure may occasionally require an overnight stay.

A hysteroscopy is an examination procedure that is used to look inside the cavity of the uterus (womb) and see the polyps that are to be removed.

A fine telescope called a hysterocope is introduced into the uterus (womb) through the vagina and the cervix (neck of the womb). Sterile fluid 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.

The polyp is then grasped, removed and sent to the laboratory for analysis. No incisions are made on the outside of the body as the procedure is performed via the vagina.

What might I expect after hysteroscopy and Polypectomy?

You may experience crampy type lower abdominal pain similar to period pain, however this is short lasting and can be treated with simple painkillers.

You may experience some bleeding, but this should not be heavy and should settle in a couple of days. We advise you to use sanitary towels rather than tampons and avoid sexual intercourse until the bleeding has stopped.

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:

- **1 Bleeding** This may require a blood transfusion and /or return to theatre. If severe a hysterectomy may be required
- 2 Infection this will usually present as an offensive discharge and may require treatment using antibiotics
- **3 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.
- 4 Failure to gain entry to the uterus and complete the procedure

Getting back to normal

It is advisable to go home and rest immediately after the procedure if discharged on the same day. When discharged home, you will need to arrange for someone to drive you home. If discharged home on the same day of the procedure and you live alone, you will need to arrange for a family member or friend to stay in your residence overnight with you. Avoid sex for a few days and use sanitary towels and not tampons until you are comfortable or until bleeding has stopped. Most patients are fully recovered in two weeks.

When can I go home?

Most patients will go home later the same day but occasionally some patients may require an overnight stay.

We advise you to go home and rest to recover from the procedure and anaesthetic.

You may need to take a few days off work afterwards to recover from having a general anaesthetic.

When will I know the results of the operation?

A doctor will see you before you go home, but the results of the of the specimen sent for examination will not normally be available for two to three weeks, although in some cases this may be sooner. We will contact you with the results when they are available.

Are there any side effects after removal of the polyp?

You may experience some period like cramping which can be treated with simple painkillers. It is common to have some light vaginal bleeding for a few days.

We advise you to use sanitary towels rather than tampons and avoid sexual intercourse until the bleeding has stopped.

If you experience any heavy blood loss, offensive discharge or severe pain in your lower abdomen, please see your GP who will investigate.

When to seek medical attention:

While it is unusual to have problems once you are at home, see medical attention if any of the following occurs:

- Fever with a temperature above 38 degrees or chills
- Increased abdominal pain which is not relieved by pain medications
- Increased/prolonged bleeding
- Unusual foul smelling vaginal discharge (yellow/green in colour)

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 to 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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