

Hysteroscopy

This information sheet may be available in different formats. It is a brief outline of this problem and is not intended to replace verbal communication with medical or nursing staff.

What is a Hysteroscopy?

Hysteroscopy is a procedure carried out to look at the inside of the womb. A hysteroscope, which is a type of camera, is inserted via the vagina into the neck of the womb. The instrument is then attached to a light source to allow the surgeon the opportunity of examining your womb.

What are the benefits of having this surgery?

This surgery will enable the surgeon to view the internal structures of the womb without the need for a more lengthy operation requiring an incision (cut) to the abdomen

Do I need anaesthetic?

Not always. Many patients are able to have this procedure carried out in clinic. However, not all patients are suitable to have it done as an outpatient without anaesthetic and many doctors will recommend that a general anaesthetic is used as they are able to have a clearer look without causing discomfort. If you do require admission it is usually done as a day case procedure and lasts approximately 10 – 15 minutes only. The doctor will be able to discuss your suitability to have the procedure carried out in clinic.

What alternatives do I have?

This depends on the reasons for having the investigation. Other possible investigations may be an ultrasound scan or surgery to view the pelvis. The doctor would be happy to discuss any alternative investigation or treatment if they are applicable to your particular case.

What happens following Hysteroscopy?

Sometimes small samples or biopsies are taken, you will be told if this is the case. These will be sent to the laboratory for examination. You will be advised of the results, as soon as they are available. If

the doctor thinks you require medication, he will prescribe this for you before you leave.

If it is necessary to carry out any further surgery or investigations, the doctor will advise you of this before discharging you.

On discharge you are advised to rest for 2 – 3 days. Some bleeding may be experienced, though this should be minimal.

Pain is usually mild and simple analgesia such as Paracetamol is effective in most cases.

What are the risks involved with a Hysteroscopy?

A Hysteroscopy is a very safe operation but on very rare occasions it is possible to suffer a small perforation to the wall of the womb, this will usually close without surgical intervention and will result in you needing to stay in hospital for a longer period, so that you can be observed closely.

Infection is a possible complication, however it is rare. If this should happen you may develop a foul smelling discharge, abdominal discomfort and a temperature. If you have any of these symptoms, seek advice from your GP.

An extremely rare complication is weakening of the fibres and muscles of the cervix (neck of the womb). If this does happen it can increase the risk of late miscarriage.

Retained tissue

Any tissue taken at the time of your operation will be sent for examination and your Consultant will be informed of the result. Following investigation the tissue will be disposed of in accordance with health and safety.

The staff are always prepared to discuss these and any other issues with you. If you have any concerns following surgery contact The Emergency Room at Liverpool Women's Hospital on 0151 702 4583 or Ward 4 at Aintree Centre for Women's Health on 0151 529 3433

For further information visit <http://www.2womenshealth.co.uk/>

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