

# Cervical Screening Colposcopy

Information for Patients

## Follow-up appointments?

The frequency of follow-up appointments depend on the abnormality and whether or not you have had treatment.

After treatment for CIN it is normal to require at least one follow-up appointment after treatment.

If you have been discharged from the colposcopy clinic, you may require smears more frequently than you had them before.

You should always ensure that you know when your next smear test should be afterwards.

## Public Transport

- We are just three minutes walk from **St John's Wood Underground Station** (*Jubilee Line*)
- Bus numbers **13, 46, 82** and **113** pass along Wellington Road. The nearest stop is just before St John's Wood Underground Station.
- Bus numbers **46 & 187** go along Circus Road. The bus stop is close to the Hospital's Circus Road entrance.
- Bus numbers **189 & 139** go along Abbey Road.

## Car Parking

- There is a Public Car Park in Kingsmill Terrace (*just off Acacia Road*) but there is no parking at the Hospital.



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Hospital of  
St John &  
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## What is colposcopy?

Colposcopy is an examination of the cervix (the neck of the womb) using a specially designed microscope (colposcope).

## Why do I need colposcopy?

The main reason for performing colposcopy is to detect pre-cancerous changes of the cervix although other conditions can also be diagnosed during a colposcopic examination. The most common indications for colposcopy are:

- An abnormal smear
- Bleeding after intercourse
- An identified abnormality on the cervix
- Persistent vaginal discharge
- Bleeding between periods
- Transplant patients or those with HIV

If your smear test is abnormal, then you should not be alarmed. One in twelve smear tests are abnormal and this usually means that small changes have been found in the cells of your cervix. These changes are known as 'dyskaryosis' and act as an early warning sign that cancer might occur in the future. It is very rare for an abnormal smear to show cancer.

## What should I do before colposcopy?

You will be asked to undress from the waist downwards (though a full skirt need not be removed). You may wish to wear a skirt to avoid removing all your lower clothing.

It is common to have a small amount of bleeding after colposcopy. You may want to bring a sanitary towel just in case. Tampons are best avoided immediately after colposcopy if a biopsy is performed.

It will be necessary to know the date of your period. You may wish to note this in advance.

Colposcopy can be done safely during pregnancy, although treatment is usually left until after delivery.

## What actually happens?

You will be asked to lie on a gynaecological examination couch with your legs in supports.

When you are positioned correctly a speculum will be placed into your vagina just as when you had a smear. A smear test may then be repeated.

The cervix will then be examined using the colposcope. Special dyes are often applied to the cervix during the examination.

It is sometimes necessary to take a small sample of tissue (a biopsy) from the surface of the cervix. The biopsy is the size of a pinhead. You may feel a slight sting but it should not be painful.

## What happens afterwards?

The findings will be explained to you but the actual result may not be available until some days afterwards when the biopsy and smear have been analysed.

Colposcopy has no major side-effects. Very occasionally, women can get a reaction to the iodine in one of the dyes. If you have a known iodine allergy you must let the doctor know.

There is no effect on future fertility or pregnancy.

If you have had a biopsy, you should refrain from intercourse for five days and use sanitary towels rather than tampons. (Following treatment you are advised to refrain from intercourse for a month).

## What will the examination show?

The colposcopy shows the type and extent of an abnormal area on the cervix. The biopsy will show the severity as well as the type. The technical term used to define abnormal cells detected on biopsy is 'Cervical Intra-epithelial Neoplasia' which in layman's terms means 'Cervix; In the skin; New cells'. The abbreviation CIN is often used.

There are three grades of CIN. CIN 1 is when a third of the cells in the affected area are abnormal; CIN 2 is when two thirds are abnormal; and CIN 3 is when they are all abnormal. It is extremely rare for cancer to have already developed.

Not all CIN needs treatment. Sometimes it can go away on its own and is just watched. However, it is normal to recommend treatment for CIN 2 or CIN 3.

Treatment is usually performed under local anaesthetic as an outpatient appointment.

There is a separate information leaflet for women who require treatment.