

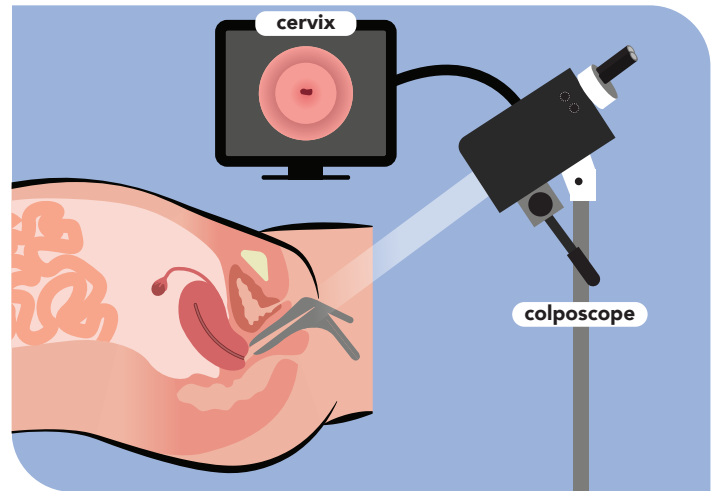
WHAT IS IT?

Colposcopy is an office procedure that allows the doctor to closely examine the vulva, vagina, and cervix.

It is performed with a **colposcope** – a special microscope that lets the doctor examine your cervix closely. Colposcopy is done by a specially trained physician (usually a gynecologist) in a clinic and takes approximately 10 to 20 minutes.

WHEN IS IT USED?

The main goal of colposcopy is to identify an abnormal (precancerous or cancerous) area of cells. It is usually used after an abnormal Pap test, which is used to screen for cervical cancer. Sometimes you may be referred for other reasons, like abnormal vaginal bleeding or skin changes of the vulva.



HOW CAN I PREPARE?

- Avoid intercourse or inserting anything in the vaginal for 48 hours before your colposcopy.
- Be sure to inform your doctor of your pregnancy status, since although colposcopy is safe in pregnancy, some procedures should be avoided.

How is it completed?

(1) Your gynaecologist will use a **speculum** (a similar instrument to that used during Pap tests) to **look inside the vagina and visualize the cervix.**

(2) A vinegar solution, called **acetic acid**, is applied to the cervix and is used to help identify any abnormal areas. You may feel a mild burning sensation when it is applied.

(3) The colposcope is placed at the opening of the vagina to **look for any abnormal areas** on the cervix or in the vagina. The colposcope does **not** enter the vagina.

(4) If there are abnormal areas, a small tissue sample called a **biopsy** may be taken. You may feel a slight pinch or cramp as the tissue is removed.

(5) The biopsied tissue will be sent for **lab testing.**

References

1. Feltmate CM, Feldman S. Colposcopy. In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA. (Accessed on August 09, 2022)
2. Burness JV, Schroeder JM, Warren JB. Cervical colposcopy: Indications and risk assessment. American family physician. 2020 Jul 1;102(1):39-48.
3. Khan MJ, Werner CL, Darragh TM, Guido RS, Mathews C, Moscicki AB, Mitchell MM, Schiffman M, Wentzensen N, Massad LS, Mayeaux Jr EJ. ASCCP colposcopy standards: role of colposcopy, benefits, potential harms, and terminology for colposcopic practice. Journal of lower genital tract disease. 2017 Oct 1;21(4):223-9.

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RISKS

Colposcopy is a safe procedure. If a biopsy is taken, there are some very small risks:

- **Bleeding** – the risk of bleeding is small, and if anything, is usually very light spotting. A topical paste (Monsel's solution) is applied to the biopsy site after it is taken to stop bleeding. You may notice brown or black clumpy discharge after the procedure if this paste is used.
- **Infection** – this risk is also small, but can present as post-procedure pelvic pain, discharge with pus, or abnormal bleeding or spotting.

RECOVERY

After colposcopy:

- If there was **no biopsy** – no restrictions
- If a **biopsy** was taken - it is important to not douche, use tampons, or have sex for one week after the procedure. Avoid strenuous exercise for 48 hours.

If there is bleeding after the procedure, you can wear a sanitary pad. It is normal to have some mild cramping, spotting, and dark or black colored discharge for a few days.

Over the counter painkillers including Tylenol and Advil can be used for cramping/discomfort.

RESULTS OF COLPOSCOPY

Results of the colposcopy are generally available within 2-4 weeks (depending on the test ordered). Your provider will review these results with you. If there are abnormal cells, the type of treatment depends on your age and whether the abnormality is low grade or high grade. **Your doctor will discuss with you in more detail about the type of follow up and treatment that is recommended for you.**

Low grade changes

These low grade changes often go away on their own, and your doctor will arrange ongoing follow up.

High grade changes

Your doctor may suggest another procedure to remove or destroy the abnormal cells. This could include a loop electrosurgical incision procedure (LEEP; where the cells are removed), cryotherapy (cold chemicals to damage the abnormal cells), or laser surgery (where laser energy destroys the abnormal cells).

Signs to watch for

Contact a healthcare provider if you have:

Heavy bleeding

Foul-smelling vaginal discharge

Fever or chills

Severe pelvic (lower abdominal) pain

References

1. Feltmate CM, Feldman S. Colposcopy. In: UpToDate, Post TW (Ed), UpToDate, Waltham, MA. (Accessed on August 09, 2022)
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