PATIENT EDUCATION N

The American College of Obstetricians and Gynecologists WOMEN'S HEALTH CARE PHYSICIANS

Colposcopy

Colposcopy is a way of looking at the **cervix** through a special magnifying device called a **colposcope**. It shines a light onto the **vagina** and cervix. A colposcope can greatly enlarge the normal view. This exam allows an **obstetrician–gynecologist (ob-gyn)** to find problems that cannot be seen by the eye alone.

This pamphlet explains

- reasons for colposcopy
- how colposcopy is done
- what to expect before, during, and after the procedure

Reasons for Colposcopy

Colposcopy is done when results of *cervical cancer* screening tests show abnormal changes in the cells of the cervix. Colposcopy provides more information about the abnormal cells.

Colposcopy also may be used to further assess other problems, including

- genital warts on the cervix
- cervicitis (an inflamed cervix)
- benign (not cancer) growths, such as *polyps*
- pain
- bleeding

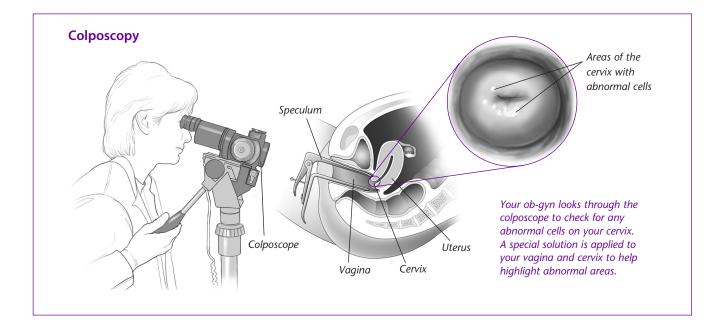
Sometimes colposcopy may need to be done more than once. It also can be used to check the result of a treatment.

The Procedure

Colposcopy typically is done in the office of your ob-gyn. The procedure is best done when a woman is not having her period. This gives your ob-gyn a better view of the cervix. For at least 24 hours before the test, you should not

- douche
- use tampons
- use vaginal medications
- have sex

As with a *pelvic exam*, you will lie on your back with your feet raised and placed on foot rests for support. A *speculum* will be used to hold apart the vaginal walls so that the inside of the vagina and the cervix can be seen. The colposcope is placed just outside the opening of your vagina.



A mild solution will be applied to your cervix and vagina with a cotton swab or cotton ball. This liquid makes abnormal areas on the cervix easier to see. You may feel a slight burning.

Biopsy

During colposcopy, your ob-gyn may see abnormal areas. A *biopsy* of these areas may be done. During a biopsy, a small piece of tissue is removed from the cervix. You may feel a pinch or cramping while this is done.

Cells also may be taken from the canal of the cervix. A special device is used to collect the cells. This is called endocervical curettage.

Results

If a biopsy was taken, the tissue will be studied in a lab. When biopsy results come back from the lab, your ob-gyn will discuss them with you. Depending on the results, you may need more frequent cervical cancer screening, or you may need further testing or treatments.

Recovery

If you have a colposcopy without a biopsy, you should feel fine right away. You can do the things you normally do. You may have a little spotting for a couple of days.

If you have a colposcopy with a biopsy, you may have discomfort and cramping for 1 or 2 days. Overthe-counter pain medications may be helpful. You may have some vaginal bleeding and a dark discharge for a few days. The discharge may occur from medication used to help stop bleeding at the biopsy site. You may need to wear a sanitary pad until the discharge stops.

Your ob-gyn may suggest you limit your activity for a brief time. While the cervix heals, do not put anything into your vagina for a short time:

- Do not have sex.
- Do not use tampons.
- Do not douche.

Call your ob-gyn right away if you have any of these problems:

- Heavy vaginal bleeding (using more than one sanitary pad per hour)
- Severe lower abdominal pain
- Fever
- Chills

Finally...

Cervical cancer screening is a good way to find cervical changes that could become cancer. Colposcopy gives more information if cervical cancer screening results are abnormal. Talk with your ob-gyn about the results of your colposcopy and biopsy.

Glossary

Biopsy: A minor surgical procedure to remove a small piece of tissue. This tissue is examined under a microscope in a laboratory.

Cervical Cancer: A type of cancer that is in the cervix, the opening to the uterus at the top of the vagina.

Cervix: The lower, narrow end of the uterus at the top of the vagina.

Colposcope: A special magnifying instrument used to examine the cervix, vagina, and vulva.

Colposcopy: Viewing of the cervix, vulva, or vagina under magnification with an instrument called a colposcope.

Obstetrician–Gynecologist (Ob-Gyn): A doctor with special training and education in women's health.

Pelvic Exam: A physical examination of a woman's pelvic organs.

Polyps: Abnormal tissue growths that can develop on the inside of an organ.

Speculum: An instrument used to hold open the walls of the vagina.

Vagina: A tube-like structure surrounded by muscles. The vagina leads from the uterus to the outside of the body.

This information is designed as an educational aid to patients and sets forth current information and opinions related to women's health. It is not intended as a statement of the standard of care, nor does it comprise all proper treatments or methods of care. It is not a substitute for a treating clinician's independent professional judgment. For ACOG's complete disclaimer, visit www.acog.org/WomensHealth-Disclaimer.

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