

Your Colposcopy Clinic Visit

**Obstetrics and Gynecology Clinic
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301 James Street South
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Telephone: 905-521-6041

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Welcome to the Colposcopy Clinic

We recognize that coming to the Clinic may be very stressful. We will give you clear information and answer any questions you may have.

At our clinic, patient care is provided by a team of people who work together. The team includes doctors, nurses and clerical staff.

This is a 'teaching' clinic. Your doctor may have a resident or a student doctor with him or her.

If you miss an appointment

- We will call you with a new appointment date and time.

**Take care of yourself.
It really depends on you!**

About your appointments

Your health is important.

The most important thing you can do to help yourself is to keep your appointments.

- The clinic will send a letter to remind you of your upcoming appointment.
- If you have heavy vaginal bleeding or cannot keep your appointment, please call to reschedule.
- If you change your address or phone number, please let us know.

If you have any questions, please call the Clinic. We will be glad to help you.

Call 905-521-6041

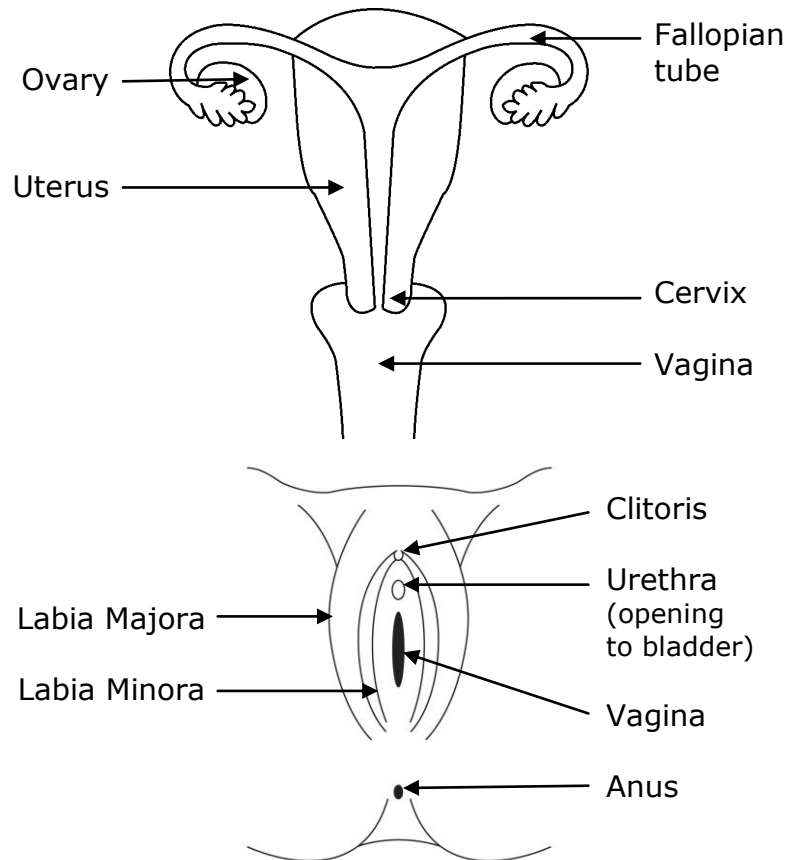
- When you call, tell the clerk why you are calling and leave your name and number.
- If you do not want our clinic to call you at your home phone number, please tell the clerk and nurse. Give them another contact or phone number where they can reach you and/or leave a detailed message.

What is Colposcopy?

Colposcopy is an examination with a large microscope called a colposcope. This colposcope does not touch you or go inside your vagina. It allows the doctor to look at your cervix or vulva under magnification.

To see your cervix we use the same instrument your doctor uses to do your routine pap smear.

Female reproductive organs



Can my problem come back?

After treatment we will follow you in the Colposcopy Clinic for one year or longer when needed and do all your Pap smears here. You do not need to have a Pap test done by your regular doctor until you are discharged from the clinic.

If dysplasia does come back, it is usually within the first year. Women who smoke or have a weak immune system are more likely to have dysplasia come back again. About 10 to 15% of women need a second treatment.

Dysplasia can come back even after the first year. You must have regular Pap tests, even after you are discharged from the clinic. Your doctor will tell you how often you need a Pap test.



The Colposcopy Clinic doctor only examines your cervix, vagina and vulva. He/she does not examine your uterus, ovaries or breasts.

Go to your family doctor or health care provider for your routine pelvic and breast exams.

How does treatment affect pregnancy?

The treatments we do in the clinic should not cause a problem with future pregnancies.

Very rarely, scar tissue can form after a cone biopsy, making it difficult for the cervix to open during labour. If this happened you would have a caesarean section. Even less common, the cervix may open during pregnancy. In this case, a stitch is used to keep the cervix closed.

A cone biopsy can increase your risk of premature labour. The doctor looking after you during your pregnancy should be told that you have had a cone biopsy.

If you are already pregnant when dysplasia is found, you will still need to have a Colposcopy exam. Having this exam will not harm your baby as no biopsies are performed on your cervix when you are pregnant.

Dysplasia will not harm your baby. Usually we do not treat you while you are pregnant, but you do need close follow-up. You will be treated after the baby is born, if your doctor feels it is necessary.

Why have I been referred to the Colposcopy Clinic?

The most common reason for being sent to the Colposcopy Clinic is that your doctor has found abnormal cells on your Pap smear. The doctors in the Colposcopy Clinic have special training which allows them to diagnose abnormal cells. Your problem may also be on the vulva, which is the area outside the vagina that you can see.

Abnormal does not necessarily mean cancer. Very few women have cancer of the cervix. This change in cells is called dysplasia.

What is dysplasia and what causes it?

Dysplasia is a change in the growth of the cells. It can be on your cervix, vagina or vulva.

Dysplasia is not cancer. Some levels of dysplasia could turn into cancer if not treated. If you need treatment, your doctor will decide which treatment is best for you. Treatments are discussed later.

Anyone who is having sexual intercourse or has had sexual contact (including manual or oral contact) in the past is at risk for developing dysplasia.

Most levels of dysplasia are believed to be caused by Human Papilloma Virus, which is also called HPV.

Other things which increase your chance of developing dysplasia are:

- smoking
- sexual intercourse at an early age
- multiple sexual partners
- sexually transmitted diseases

What is HPV?

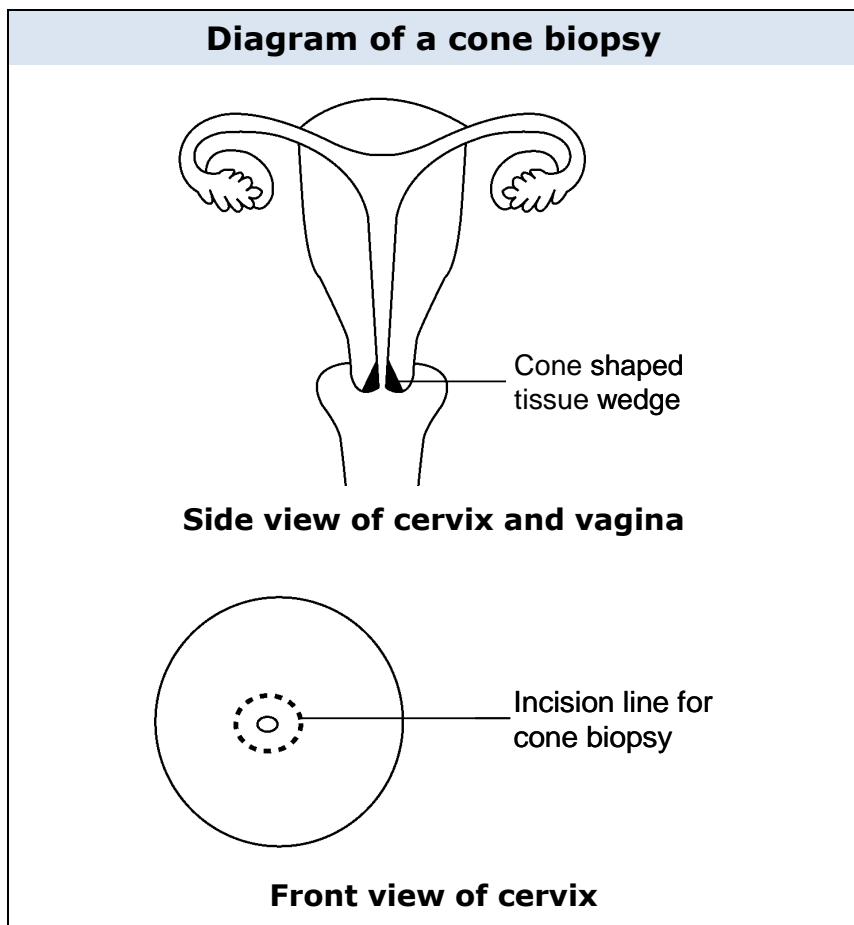
- HPV is a family of viruses commonly found in both men and women. Most people will come in contact with the HPV virus at some point in their life.
- The most common way to get an HPV infection is through sexual contact. Usually there are no symptoms and often people do not know that they have HPV.
- HPV can stay in your body for a number of years. HPV can cause cell changes in the cervix which can be found in your routine pap smear. This change is called dysplasia. Many of these cell changes will go away without any treatment.

Are there restrictions on sexual intercourse before or after treatment?

There are no restrictions on sexual intercourse before your clinic appointment, but it is best if you do not have sexual intercourse the night or morning before a Pap test.

The restrictions after a biopsy and treatment are shown in this chart.

Procedure	No sexual intercourse for:
Biopsy	48 hours
Loop Excision	2 weeks minimum
Cone Biopsy	3 weeks
Vulvar Surgery (Laser or Excision)	4 to 6 weeks



Hysterectomy

It is extremely rare to treat dysplasia with a hysterectomy (surgery to remove the uterus). This is usually done only if there are other gynecological problems. If you have any questions or concerns about this, please ask your doctor.

- Some types of HPV can lead to cancer of the cervix.
- It is very important to see your doctor for an exam to be sure the cell changes (dysplasia) are not getting worse.

Your first visit

On your first visit you will meet a nurse who will take you to an examination room. We will explain why you have been sent to the clinic and answer any questions you have about colposcopy.

Then you will meet the doctor who will look at your cervix or vulva with the colposcope. The doctor will do a Pap smear and then spray your cervix or vulva with vinegar, which may sting for a few seconds. The vinegar will make any abnormal areas look white.

If there is a spot on your cervix or vulva that does not look normal your doctor may want to do a biopsy (see next page).

The examination usually takes about 10 minutes.

After it is over, the doctor will tell you what he or she found.

Treatments are not usually done at the first visit. You will be asked to make an appointment to come back to the clinic if you need treatment. If you do not need treatment you may need regular follow-up in the clinic.

Coming back to the clinic is very important. You cannot see or feel dysplasia. Only your doctor can see it by using a colposcope.

What is a biopsy?

A biopsy is a test. It is not a treatment.

A biopsy from the cervix removes a tiny piece of tissue the size of a small grain of rice. This tissue is sent to the lab for testing. Your cervix has very few nerve endings that cause pain, but you might feel a pinch or a cramp if a biopsy is taken.

After the biopsy is taken, a yellow paste is put on the area. This may give you a dark discharge from your vagina. You may also have some bright red spotting, so wear a panty liner for a few days.

Do not have intercourse or use tampons for 48 hours after the biopsy.

Cone Biopsy

A cone biopsy removes a cone shaped wedge of tissue from your cervix. A cone biopsy is necessary if your doctor cannot see all the abnormal cells and he or she wants to check deeper into your cervix.

- **Before treatment:** You will come to the hospital for this treatment. It is done in the operating room, and you will be given a general anesthetic to put you to sleep.
- **After treatment:** You can have a bloody discharge, which usually lasts 2 weeks. You will need to take some time off work. Do not use tampons or have sexual intercourse for 3 weeks after your cone biopsy. You may have a bath or shower.

Before you leave the hospital we will give you an 'after treatment' information sheet. If you do not get this sheet, please talk to the clinic nurse.

Types of treatment

Loop Excision (most common type)

Loop excision uses a small wire loop to remove the abnormal cells (dysplasia) from your cervix. A sample is sent to the lab for testing.

This treatment takes about 5 minutes and is done in the clinic.

- **Before treatment:** Your doctor will ‘freeze’ your cervix with a local anesthetic. This is the same medication that your dentist uses.
- **After treatment:** You may have some cramps. You may have a dark bloody discharge, which can last 2 weeks. Some women have little or no discharge. This is also normal.

The nurse will give you an “after treatment” information sheet.

Do not use tampons or have sexual intercourse for at least 2 weeks.

You may have a bath or shower.

Vulvar biopsies

This is done in the clinic. Before a vulvar biopsy, the area will be ‘frozen’ with local anesthetic. This is the same medication that your dentist uses.

After the biopsy, keep the area clean and dry. The nurse will give you a vulvar care information sheet. When the freezing wears off you may have some discomfort. Talk with your doctor or nurse if you have any questions.

If you had a biopsy it does not mean your doctor thinks you have cancer.

A biopsy may be done even if you have mild cell changes.

Do I always need treatment?

If the problem is mild, you may not need to be treated. You will need regular check-ups with the clinic doctor to be sure the cells are not getting worse. **Coming back to the clinic is very important.**

Your clinic doctor will tell you when you can be safely discharged from our clinic. You should not have pap smears done anywhere else as long as you are a colposcopy patient. You should see your regular doctor or health care provider for routine exams or other problems.

Your treatment visit (cervix)

There are many ways to treat dysplasia. Your doctor will discuss which treatment is best for you.

Some patients feel nervous before their treatment visit. It is a good idea to bring a support person along with you.

There are no special preparations needed before your treatment.



Be sure to eat a normal breakfast or lunch on the day of your treatment. **Do not fast.**

If you have heavy bleeding, you cannot be treated. Please call the clinic to change your appointment.

The clinic nurse will take you to the treatment room. The nurse will talk to you about your test results, explain the treatment, show you the equipment used, and answer any questions you may have.

Your treatment visit should take about the same time as your first visit.

After your treatment, you may take acetaminophen or ibuprofen if you feel 'crampy'.

Ask your doctor or nurse about what you can or cannot do. Many women return to work the same day, but some do need to take time off work.

Follow-up care

- You will need to come back to the clinic for a check-up every 4 to 6 months for 1 year, or longer if your doctor feels it is necessary.
- Once you are discharged, it is important that you continue to have regular pap smears with your family doctor or health care provider.