

# **Vulval Biopsy**

Gynaecology

### Introduction

This booklet has been designed to give you information about having a vulval biopsy taken. Do not hesitate to speak to your medical or nursing team should you have any queries.

# What is a vulval biopsy?

A vulval biopsy is the removal of one or more small pieces of skin from the vulval area, by means of a small cut. Depending on the size of the cut it may or may not need stitches. The doctors or nurses will inform you if you have stitches.

Any skin removed is then sent to the laboratory for examination.

This procedure usually takes up to 15 minutes and is usually performed as a day case. However, very occasionally, it becomes necessary to stay overnight; if, for example, the anaesthetic has left you feeling unwell.

# Why you may require a vulval biopsy?

If you have any of the following symptoms:

Recurrent itching, irritation, soreness, blistering, burning, lumps, vulval pain.

### Consent

We must seek your consent for any procedure or treatment beforehand. Your doctor will explain the risks, benefits and alternatives where relevant before they ask for your consent. If you are unsure about any aspect of the procedure or treatment proposed, please do not hesitate to ask for more information

# What are the benefits of this surgery?

To help diagnose your condition and to enable us to commence treatment.

# Are there any risks of surgery?

Although it is unlikely that complications will occur, we are obliged to inform you of the possibilities:-

- Infection (rare)
- Haemorrhage (heavy bleeding) (rare)

The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available
- If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature
  or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice
  from 111
- Keep the environment clean and tidy
- Let's work together to keep infections out of our hospitals and care homes.

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- If any of the above occurs, you may be required to have corrective treatment such as:-
  - A course of antibiotics
  - and / or
  - Blood transfusion (extremely rare)
- Anaesthetic risk, this is very small unless you have a specific medical problem; this will be discussed with you

# Are there any alternative treatments?

There are currently no suitable alternatives to this procedure, however, it is sometimes possible to have the biopsy taken with a local anaesthetic and/or in the outpatient department. Your consultant will advise you if you are suitable to have the procedure under a local anaesthetic and where the best place for this to be carried out would be. The after care for the procedure is still the same as detailed in this leaflet except that you will not have received a general anaesthetic. If you do not wish to have this operation you need to speak with your consultant. The choice about which treatment is best to have will be made together with your doctor. This will be based on the risks and benefits of the treatment and individual circumstances.

# What should I expect before the operation?

Before admission for surgery you will be asked to attend a pre-admission clinic to ensure that you are fit and well for your surgery. A nurse practitioner or a doctor will ask about your general health, past medical history and any medication that you are taking. Any necessary investigations will be organised, such as blood tests, ECG and chest X-rays.

You will receive information about your admission, hospital stay, operation and pre and post-operative care. You will also be given the opportunity to ask any further questions that you may have. If you smoke, try to stop completely. This will make your anaesthetic safer, reduce the risk of complications after operation, and speed up the recovery time. If you are unable to stop completely, even doing so for a few days will be helpful.

Some medicines need to be stopped or altered before the operation. You should check with your GP and bring your list of medications with you when you come to the pre-admission clinic.

If you take a contraceptive pill, you should stop it at least four weeks before the operation and you should use another method of contraception.

# What happens on the day of my operation?

On the day of your operation you will not be able to eat or drink for a specified time prior to your surgery. You will be informed of the times at your pre-operative assessment and in your admission letter. A doctor will see you prior to your operation to confirm your written consent which will be required before your operation can take place (This should already have been obtained at the pre-admission clinic). You will have the opportunity to ask any questions not covered during your pre-admission clinic appointment.

It is important to have a bath or shower on the day of your procedure before you come into the hospital. Please ensure that any nail polish or false nails are removed from fingers and toes. Also after your shower or bath do not apply any body cream, make up, or deodorant to your skin. All jewellery must be removed other than a wedding ring. This can be left on and taped over prior to your surgery.

You will be asked to put on a theatre gown and you may need a pair of elasticated stockings (TEDS). The stockings help to prevent clots (thrombosis) in your legs. You will need to keep these on all the time you are in hospital and you will be advised how long you will need to continue to wear them once you are discharged from hospital.

You will be escorted to theatre by a member of our team. If a pre-med has been given, a theatre trolley will be arranged to collect you from the ward otherwise you will walk to theatre. You will be taken into the anaesthetic room where you will be given a general anaesthetic; this is started by an injection into your vein (usually in the back of your hand), once you are "asleep" you will be escorted into theatre.

You will wake up in the recovery area once your operation is finished and a team member will then escort you back to your bed on the ward.

# What will happen after my operation?

Once you have been back on the ward for a while and had something to eat and drink and have passed urine, you should be ready to be discharged home.

You may experience a small amount of bleeding from where your biopsy was taken. This can continue for about a week and become a brown discharge. It takes up to two weeks for the area to heal.

You may experience some discomfort and will be offered painkillers, if required.

# What will happen on discharge?

If you are allowed home on the day of your operation, it is advisable that you are escorted home by car or taxi and that a responsible adult stays with you overnight.

It is recommended that for 24 hours following a general anaesthetic you do not:-

- Drive a car
- Operate machinery
- Smoke or drink alcohol or use recreational drugs
- Sign any legally binding documents

You are advised to keep the vulval area as clean as possible by bathing or showering daily. Use of a bidet can also help to keep the area clean.

Any stitches will gradually dissolve as the area heals. You may notice some stitches come out as you bathe or find them in your underwear.

It is advisable to wear loose cotton underwear and avoid wearing tights until the area is healed.

You are advised to refrain from strenuous activities and sexual intercourse for two weeks to allow the affected area to heal.

You need to look out for signs of infection. These include high temperature and/or strong smelling discharge. If you have any of these symptoms, it is advisable to consult your GP.

A discharge letter will be sent to your GP; you will be given a copy of this to keep as your reference.

The results of the biopsy will be given to you at an outpatient appointment, or some consultants prefer to write to you personally with the results of your operation.

If you require medication to go home with, this will either have been given to you prior to discharge or you may make alternative arrangements for the medication to be collected from the ward the following day. Pain killers are not routinely given to you to take home from hospital; you are advised to get some paracetamol or alternative ready for your discharge.

Generally, the recommended time off work following this operation is 24-48 hours, however this can vary depending on your circumstance. You can discuss this with your nurse or medical team. If you require time off work you may be able to self certify or a medical certificate can be issued from the ward or your GP.

If you have any questions or worries prior to or after your operation, please contact your GP or ring the Gynaecology ward on 01902 694034. (24 hours)

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### Useful websites and contact numbers

### **Royal College of Obstetricians and Gynaecologists**

www.rcog.org.uk

### Your complete guide to gynaecology

www.gynaecare.eu

#### **Vulval pain society**

www.vulvalpainsociety.org - this is a voluntary organisation giving information and support to women with any vulval condition

### Vulval awareness campaign organisation

www.vaco.co.uk

#### **PALS**

Patient Advice & Liaison Service - 01902 695362 Weekdays 09.00-17.00

### References

Campbell S, Monga A. Gynaecology by Ten Teachers 1974 Edition, 2011 Arnold London

Gangar E, Allanach V, Gynaecology Nursing A Practical Guide 2001 Churchill Livingstone

Impey L, Obstetrics and Gynacology 1999, Blackwell Science Ltd

Mires C, et al, Core Clinical Cases in Obstetrics and Gynaecology - A Problem Solving Approach (3rd edition) Hodder Arnold, 2011

#### **English**

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

#### Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

#### **Polish**

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

### **Punjabi**

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

#### Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

#### **Traditional Chinese**

如果您需要以其他方式了解信息,如易读或其他语种,请告诉我们。 如果您需要口译人员或帮助,请告诉我们。