

# Endometrial biopsy

Gynaecology

## Introduction

This leaflet has been designed to give you a better understanding of what an endometrial biopsy is. Please do not hesitate to speak to a member of your medical or nursing team if this leaflet does not answer all your questions.

## What is an endometrial biopsy?

An endometrial biopsy is a procedure where a small sample of tissue from the inner lining of the womb (endometrium) is removed. This sample is then sent off to the laboratory to be examined under a microscope for any abnormal cells.

## What is the benefit of the procedure?

The benefit is this procedure will rule out thickening or abnormal or cancerous changes in the lining of womb if you are experiencing any of the following symptoms:

- Abnormal vaginal bleeding
- Heavy or prolonged periods
- Bleeding between periods
- Bleeding or discharge after the menopause.

Most times, when this test is done, it shows that there is no cancer, but it is important to be sure.

## What are the risks?

The procedure is generally very safe.

- Rarely, the tube used can go through the womb wall (perforate it). If this should happen, you may need to be admitted for observation.
- Occasionally, there can be a lot of bleeding afterwards or infection can develop afterwards. Infection may present with symptoms such as fever, smelly vaginal discharge or severe abdominal pain up to 14 days after the biopsy and can be treated with antibiotics. If you are worried please seek the advice of your GP.

Sometimes it can be difficult to get the biopsy, especially if you have not had any children or you have had treatment to your cervix in the past.

**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.

In these circumstances where it has not been possible to obtain the sample in outpatients, you have the option of undergoing the procedure under general anaesthetic (where you are put to sleep) in theatre. This would be arranged for you on another date as you would need to attend a pre operative clinic to prepare for the admission. The risks and benefits of having this procedure under a general anaesthetic will be explained to you as part of the consent process.

## Are there any alternatives to endometrial biopsy?

The only alternative to having an endometrial biopsy whilst awake in the outpatient department, is to be admitted into hospital and having the biopsy taken under a general anaesthetic. The choice about which treatment is best for you will be made together with your doctor. This will be based on the risks and benefits of the treatment and your individual circumstances. The doctor will have explained the different treatment options to you and what will happen if you decide not to have any treatment at all.

## Who cannot have an endometrial biopsy?

In certain circumstances, an endometrial biopsy is not advisable. This includes: If you are pregnant, have an infection in the vagina or pelvis or have pelvic inflammatory disease.

## What happens about gaining my 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 does the procedure involve?

Obtaining the biopsy is a simple procedure and only takes a few minutes. A speculum is placed in the vagina (similar to having a smear test) to see the cervix. A local anaesthetic is sometimes applied to the cervix. Sometimes an instrument is used to grip the cervix and hold it steady to help numb the area if the doctor feels this is required. A narrow tube-like device is then passed through the cervix into the womb. The tube is moved up and down the inside lining of the womb, and sucks up some tissue.

This may be carried out more than once to ensure a good amount of tissue is obtained to send to the laboratory to be tested.

## Will it hurt?

Not everyone is the same. Most women get mild to moderate period-type cramps as the sample is being taken from the lining of the womb and find the procedure bearable. However, some may experience severe period-like pain during the procedure. Pain relief such as paracetamol and ibuprofen are available if required. You may continue to have some period-like cramping pains for a day or so afterwards. If you need a painkiller you can use whatever you normally use for period pains.

## How will I feel after an endometrial biopsy?

You may have some crampy period pains in the lower part of your tummy on and off for a day or two after the procedure. You may also have some light bleeding, like a period or blood-stained discharge which might last a few days. It is advisable to use a sanitary towel if you need one rather than a tampon to reduce the risk of infection. Very occasionally, the procedure can make you feel light-headed, and in this instance we will ask you to remain in the department until you feel well enough to go home.

## When can I return to work?

You can go back to work and resume normal activities, including driving, immediately following the procedure if you feel well enough.

## What do I need to avoid following the procedure?

We recommend that you do not have sex and continue to avoid tampons and swimming until the bleeding has stopped completely.

## What happens about results and follow-up?

You will be contacted (as agreed during the consultation) when the results are available. This is usually between three to four weeks but occasionally it may take longer. If the biopsy is not informative or suggests an intrauterine polyp (a growth attached to the lining of the womb), a further investigation called a hysteroscopy may be indicated. This involves passing a small camera to have a look inside the womb and take further samples. If a hysteroscopy is recommended a separate leaflet explaining this procedure will be sent to you with your results letter.

If you have any questions before your appointment, you can contact the Gynaecology Outpatient Department on 01902 307999 extension 8363 Monday to Friday 09:00 until 16:00

## 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。