

HYSTEROSCOPY

Hysteroscopy is a technique used to look inside the uterus to diagnose or treat a uterine problem.

Why is hysteroscopy done?

One of the most common uses for hysteroscopy is to **find the cause of abnormal uterine bleeding.**

- Abnormal bleeding can mean that a woman's menstrual periods are heavier or longer than usual or occur less often or more often than normal.
- Bleeding between menstrual periods also is abnormal

Hysteroscopy also is used in the following situations:

- Remove adhesions that may occur because of infection or from past surgery
- Diagnose the cause of repeated miscarriage when a woman has more than two miscarriages in a row
- Locate an intrauterine device
- Perform sterilization, in which the hysteroscope is used to place small implants into a woman's fallopian tubes as a permanent form of birth control

How is hysteroscopy performed?

Before the procedure, you may be given a medication to help you relax, or general anesthesia or local anesthesia may be used to block the pain. If you have general anesthesia, you will not be awake during the procedure.

A thin, lighted telescope-like device called a hysteroscope is inserted into your vagina, through your cervix and into your uterus.

The hysteroscope transmits the image of your uterus onto a screen, allowing the doctor to see the inside of the uterus during the procedure. It is usually one of several instruments used during treatment.

Hysteroscopy is performed at an outpatient surgery center or the hospital when you are not having your period.

THE PROCEDURE : this is done when you are NOT having a period

- A speculum is first inserted into the vagina.
- To make the procedure easier, your doctor may dilate your cervix with medication or special dilators before your hysteroscopy.
- The hysteroscope is then inserted and gently moved through the cervix into your uterus.
- Saline (salt water) will be put through the hysteroscope into your uterus to expand it, which helps your doctor see the lining more clearly.
- The amount of fluid used is carefully checked throughout the procedure.
- Your doctor can see the lining of your uterus and the openings of the fallopian tubes by looking through the hysteroscope.
- If a biopsy or other procedure is done, your doctor may use such tools as small scissors, a wire loop or graspers to treat your specific condition, remove a polyp, resection of a septum or fibroid or remove an IUD.

What should I expect during recovery?

- You should be able to go home shortly after the procedure and resume your normal activities the next day.
- If you had general anesthesia, you may need to wait until its effects have worn off.
- It is normal to have some mild cramping or bloody discharge for a few days after the procedure which is usually relieved with Motrin or Advil.. Your doctor may give you a medication to help ease the pain.
- Please call the office if:
 - If you have a fever,
 - chills or
 - heavy bleeding.

If there are no complications, you may resume sex and tampon use once bleeding stops, or in two weeks, whichever occurs first.

Risks

- Hysteroscopy is a very safe procedure, but there are some small risks.
- The hysteroscope can puncture the uterus or cervix,
- bleeding may occur or excess fluid may build up in your system.
- If a problem occurs during the procedure, it will be treated.

