

## Introduction

**A hysteroscopy is a procedure used to examine the inside of the womb (uterus).**

It's carried out using a hysteroscope, which is a narrow telescope with a light and camera at the end. Images are sent to a monitor so your doctor or specialist nurse can see inside your womb.

The hysteroscope is passed into your womb through your vagina and cervix (entrance to the womb), which means no cuts need to be made in your skin.

## When a hysteroscopy may be carried out

A hysteroscopy can be used to:

- **investigate symptoms or problems** – such as [heavy periods](#), unusual vaginal bleeding, [postmenopausal bleeding](#), [pelvic pain](#), repeated [miscarriages](#) or difficulty getting pregnant
- **diagnose conditions** – such as [fibroids](#) and polyps (non-cancerous growths in the womb)
- **treat conditions and problems** – such as removing fibroids, polyps, displaced [intrauterine devices \(IUDs\)](#) and intrauterine adhesions (scar tissue that causes [absent periods](#) and reduced fertility)

A procedure called dilatation and curettage (D&C) used to be commonly used to examine the womb and remove abnormal growths, but nowadays hysteroscopies are carried out instead.

## What happens during a hysteroscopy

A hysteroscopy is usually carried out on an outpatient or day-case basis. This means you don't have to stay in hospital overnight.

It may not be necessary to use anaesthetic for the procedure, although [local anaesthetic](#) (where medication is used to numb your cervix) is sometimes used.

[General anaesthetic](#) may be used if you're having treatment during the procedure or you would prefer to be asleep while it's carried out.

During a hysteroscopy:

- you lie on a couch with your legs held in supports and a sheet is used to cover your lower half
- an instrument called a speculum may be inserted into your vagina to hold it open (the same instrument used for a [cervical screening test](#)), although this isn't always necessary
- the hysteroscope is passed into your womb and fluid is gently pumped inside to make it easier for your doctor to see
- the camera sends pictures to a monitor so your doctor can spot and/or treat any abnormalities

A hysteroscopy can take up to 30 minutes in total, although it may only last around 5-10 minutes if it's just being done to diagnose a condition or investigate symptoms. You may experience some discomfort similar to period cramps while it's carried out, but it shouldn't be painful.

Read more about [what happens during a hysteroscopy](#).

## Recovering from a hysteroscopy

Most women feel able to return to their normal activities the following day, although some women return to work the same day.

You may wish to have a few days off to rest if general anaesthetic was used.

While you're recovering:

- you can eat and drink as normal straight away
- you may experience cramping that's similar to [period pain](#) and some spotting or bleeding for a few days – this is normal and nothing to worry about unless it's heavy
- you should avoid having sex for a week, or until any bleeding has stopped, to reduce the risk of infection (see below)

Your doctor or nurse will discuss the findings of the procedure with you before you leave hospital.

Read more about [what happens after a hysteroscopy](#).

## Risks of a hysteroscopy

A hysteroscopy is generally very safe, but like any procedure there is a small risk of complications. The risk is higher for women who have treatment during a hysteroscopy.

Some of the main risks associated with a hysteroscopy are:

- **accidental damage to the womb** – this is uncommon, but may require treatment with [antibiotics](#) in hospital or, in rare cases, another operation to repair it
- **accidental damage to the cervix** – this is rare and can usually be easily repaired
- **excessive bleeding during or after surgery** – this can occur if you had treatment under general anaesthetic and can be treated with medication or another procedure; very rarely it may be necessary to remove the womb ([hysterectomy](#))
- **infection of the womb** – this can cause smelly [vaginal discharge](#), a fever and heavy bleeding; it can usually be treated with a short course of antibiotics from your GP
- **feeling faint** – this affects 1 in every 200 women who have a hysteroscopy carried out without an anaesthetic or just a local anaesthetic

A hysteroscopy will only be carried out if the benefits are thought to outweigh the risks.

## What happens after a hysteroscopy

**You should be able to go home on the same day as your hysteroscopy. If you had an anaesthetic, you may need to stay in hospital for a few hours until it has worn off.**

You can drive yourself home if no anaesthetic or only [local anaesthetic](#) was used. If you had a [general anaesthetic](#), you won't be able to drive for at least 24 hours, so you'll have to arrange for someone to take you home.

## Recovering at home

It's a good idea to rest when you get home.

If you had a general anaesthetic, someone should stay with you for at least 24 hours until the effects of the anaesthetic have worn off. Don't drive or drink alcohol during this time.

While you recover, you may experience:

- **cramping that's similar to [period pain](#)** – this should pass in a few days and you can take regular painkillers such as [paracetamol](#) or [ibuprofen](#) in the meantime

- **spotting or bleeding** – this can last up to a week or more; use sanitary towels rather than tampons until your next period to help reduce the risk of your womb or cervix (entrance to the womb) becoming infected

These side effects are normal and nothing to worry about, but you should seek medical advice if they are particularly severe (see below).

## Returning to your normal activities

Most women feel they can return to normal activities, including work, the day after having a hysteroscopy. Some women return to work later the same day.

However, you may wish to have a few days off to rest, particularly if you had treatment such as [fibroids](#) removal and/or a general anaesthetic was used.

Your doctor or surgeon can advise you about any activities you need to avoid while you recover, but generally speaking:

- **you can eat and drink as normal straight away** – if you feel a bit sick after a general anaesthetic, try eating small, light meals at first
- **you can have a shower the same day or the next day**
- **you should avoid having sex for a week, or until any bleeding stops** – this will help to reduce the risk of infection

## Getting your results

Your doctor or nurse will let you know whether they found anything unusual during your hysteroscopy, or discuss how any treatment went, straight away.

If a small sample of tissue ([biopsy](#)) was removed from the womb, it can take several weeks to get your results. These may be sent through the post to your home address or to your doctor's surgery.

Make sure you know how you'll receive your results before leaving the hospital.

## When to get medical advice

Contact your GP or the hospital clinic if you experience:

- severe pain that isn't relieved by regular painkillers
- heavy bleeding that means you have to change sanitary pads frequently

- passing bright red blood or large clots
- foul-smelling [vaginal discharge](#)
- a fever of over 38C (100.4F)

These symptoms could be a sign of a problem, such as an infection.