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## Cervical Dysplasia, Colposcopy and Biopsy

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### Dysplasia

Dysplasia is a term used when normal cell characteristics such as the nucleus and cell size are altered or distorted. Cervical dysplasia is most often related to infection by the Human Papilloma Virus (HPV). HPV inserts itself into the nucleus of cervical cells; this alters normal cell development. HPV infection most often occurs during sexual contact.

Cervical dysplasia represents an abnormality which can potentially progress into cervical cancer if not appropriately monitored and treated. It may also be transient (as with mild dysplasia) and is most often treatable (as with moderate or severe dysplasia).

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### Colposcopy

Colposcopy is a method of viewing the vulva, perineum, vagina and cervix, using magnification. Colposcopy is most often used as an adjunct to a Pap test, as both play an important role in identifying and monitoring suspicious or abnormal vaginal and/or cervical changes. The Pap identifies that a problem exists and the colposcopy identifies the specific site of the problem. Vulvar colposcopy may be used to evaluate unusual changes or irritations of the vulva which may be associated with dysplasia, cancer, eczema, estrogen deficiency, etc.

If you have been advised to have a colposcopy you can expect that it will be very similar to obtaining a routine Pap test. What will be different?

- 1) Vinegar will be applied with a Q-tip; abnormal areas are highlighted as the vinegar is absorbed. Often the vinegar causes a mild stinging or mild cramping sensation when applied to the cervix.
  - 2) During examination of the vagina and cervix, the speculum will remain in place for a longer period of time (approximately 10-15 minutes).
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### Biopsy

Pap tests and colposcopy provide a general evaluation of the cervix or vaginal tissue, while biopsy provides specific information regarding the type and degree of cell changes. During your colposcopy exam, your clinician may recommend a biopsy to further evaluate abnormal areas. One or more tissue samples, each about the size of a rice grain, will be obtained. You may experience temporary discomfort or cramping during the procedure.

Colposcopy of the vulva provides evaluation of the vulva, while biopsy provides specific information regarding the type and degree of cell changes.

Endometrial biopsy is often performed to remove tissue from inside the uterus. The cells are evaluated to determine the type and degree of cell changes. The sample size is small. Uterine cramping is common.

Consider taking 2-4 Advil or Motrin tablets (which equals 400-800mg of generic Ibuprofen) with food or milk one hour prior to the procedure. If you are allergic to Aspirin or products similar to Aspirin, such as Ibuprofen, Advil or Motrin, take 2 tablets of regular strength Tylenol (generic is acetaminophen).

Your test results will be available within 1-2 weeks. Your clinician will contact you with the results and the next follow up recommendation; **if you have not heard from your clinician after 2 weeks, please call the Clinic at (510) 643-7109**. For "low grade" results, current guidelines recommend repeating the Pap and HPV tests in one year after the colposcopy. If the result is "moderate" or "high grade" dysplasia, you will be referred to an outside clinical practice to discuss possible treatment.

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Check our website: [www.uhs.berkeley.edu](http://www.uhs.berkeley.edu) to learn more about this medical concern or others.

For an appointment [www.uhs.berkeley.edu](http://www.uhs.berkeley.edu) or call 510-642-2000

Clinic Nurse 510-643-7197 for advice

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### Post-Biopsy Instructions

Any open skin area increases your risk of infection. Following the directions as listed below will optimize your chances for an uneventful post-biopsy recovery.

- Nothing should be placed in the vagina for at least 7 days following the biopsy. This includes sexual intercourse, tampons, sex toys and douching.
- You should be able to continue normal activity (except as noted above or as advised by your clinician). Bathing and exercise are acceptable.
- You may have light bleeding or spotting for 1-2 weeks after the biopsy procedure.
- If you experience heavy bleeding, pain, increased discharge or fever within a week after the biopsy, you should call the Tang Center for an appointment to be seen. These symptoms are not a common occurrence after a biopsy.
- If you have any questions or concerns: please contact the Advice Nurse at (510) 643-7197 or by secure message via the Tang Center web portal. The Advice Nurse line connects to After Hours Assistance when we are closed.

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### Treatment for Dysplasia

Persistent mild dysplasia (CIN 1) (greater than 2 years) or moderate-severe dysplasia (CIN 2-3) may be treated in several ways. You will be referred to an outside provider to discuss treatment or surveillance options, as these services are not available at the Tang Center.

- **Cryotherapy** uses a freezing technique to destroy abnormal cells. A very heavy watery vaginal discharge occurs for two to four weeks following the procedure as cells damaged by the freezing process shed.
- **LEEP** (Loop Electrosurgical Excision Procedure) utilizes a wire electrode to excise (remove) abnormal tissue on the cervix. This tissue is then sent to a pathology lab for evaluation and diagnosis. A local anesthetic is used prior to LEEP treatment. Light spotting or brown discharge is common for 2-4 weeks after LEEP procedure.
- **Laser treatment** uses a beam of high-intensity light which produces heat; the heat vaporizes abnormal tissues. Laser may be used as an adjunct to LEEP.
- Surveillance without treatment may be appropriate for some women. This option may be particularly recommended for younger patients. It requires that they are available for regular follow-up colposcopy appointments.

Follow-up evaluation is an important part of your care. Follow instructions as directed by your clinician for repeat Pap tests, colposcopy and/or pelvic exams.

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