

Inspection of the uterine cavity by endoscopy (Hysteroscopy)

Hysteroscopy **is performed when an abnormality in the uterine cavity is suspected**. Such abnormalities include myomas (muscle tumours) or polyps (tumours protruding from the mucous membrane).

Procedure

Hysteroscopy is carried out **under general anaesthesia if needed**. The uterine cavity is inspected via the vagina, and possible abnormalities can be removed or a sample taken. If necessary, curettage of the uterus is performed.

Recovery

You may experience minor vaginal discharge for 1–2 weeks. Due to a risk of inflammation, you should avoid intercourse, swimming, bathing, and using tampons during that time. You should shower the genital area and change the sanitary pad often enough. The next menstruation usually comes within 4–6 weeks. The following few periods may differ from normal in the amount of bleeding and pain, especially if curettage was also performed.

Treatment of pain

Usually non-prescription painkillers are enough for home treatment. Take the medication prescribed by your doctor according to instructions.

Paracetamol

Anti-inflammatory

Strong painkiller

Other medication

Follow-up visit at the Gynaecological Outpatient Clinic, with your gynaecologist, or at your health centre after 1–2 months. The histological diagnosis will be sent to you by mail.

Sick leave is 2–3 days after a hysteroscopy. If an operation is also performed, the sick leave is 3–5 days.

Contact us

If you experience inflammatory symptoms (fever, severe abdominal pain, foul-smelling vaginal discharge) or heavy vaginal discharge and clotting, contact your health centre or occupational health centre.

Gynaecological Outpatient Clinic on working days from 14.00 - 15.00 tel. **(06) 323 2012**,

Gynaecological Ward A5 at other times tel. **(06) 323 2092**,

Day Surgery Unit A2 on working days from 07.00–17.00 tel. **(06) 323 1552**

Emergency Department at other times tel. **(06) 323 1311**