

What does my smear result mean?

The result of your recent smear has shown that you **MAY** have some abnormal cells, known as dyskaryosis, in the skin of your cervix (neck of the womb) which may require some treatment.

Why have I been referred to the hospital?

You have been referred to the Colposcopy clinic so that the smear result can be investigated further.

What will happen at my appointment?

Your results will be explained in full and you will be able to ask questions. A specially trained doctor or nurse will examine your cervix with a colposcope. This is like a microscope that magnifies and lights your cervix but does not go inside you. A speculum (the same instrument that goes inside your vagina when you have a smear test) is used to see your cervix.

After a mild vinegar solution is put onto your cervix abnormal cells look different to normal cells and can usually be seen through the colposcope.

If an abnormal area is seen then a very small biopsy can be taken. Often women do not feel a biopsy being taken but if you do it should be no worse than a sharp pinch.

The results of the biopsy will show whether you have abnormal cells called Cervical Intraepithelial Neoplasia (CIN).

CIN Is NOT cancer

C	Cervical	On the Cervix
I	Intraepithelial	Means that the abnormal cells are limited to the skin and do not go any deeper
N	Neoplasia	Just another word for abnormal cells

CIN occurs in different stages:

- CIN 1: mildly abnormal changes in the skin cells
- CIN 2: moderately abnormal changes in the skin cells
- CIN 3: severely abnormal changes in the skin cells
- CGIN: occasionally the abnormal cells come from the 'inside' or entrance to your cervix and this is known as Cervical **Glandular** Intraepithelial Neoplasia

If the biopsy shows CIN 1 we generally just 'watch and wait' because we know that this mild area is very likely to get better of its own accord.

If the biopsy shows CIN 2, 3 or CGIN then generally we offer treatment to remove these abnormal cells.

This is **NOT** because they are cancer but because we do not know if they will become cancer or not in years to come. Treatment is carried out at another appointment a few weeks later.

Sometimes it may be possible to treat abnormal cells during a first

appointment; this is called **Select and Treat**.

What would this involve?

The doctor or nurse will examine your cervix as usual and decide if the abnormal area looks like it might contain CIN 2 or 3.

If it is possible; for example if the area is not too large and can be seen completely, then the doctor or nurse can carry on and do the treatment immediately without taking a biopsy.

What are the benefits of select and treat?

Select and treat means that any abnormal area will be removed at the first appointment. This will mean one less visit to the clinic and no wait for the first biopsy result.

What are the disadvantages of select and treat?

The results from the treatment may show CIN of a lower grade than expected or even no abnormality at all.

To reduce the chance of this Select and Treat is only offered to women who have a moderately or severely abnormal (high grade) cervical smear **AND** colposcopy examination shows an area that looks like CIN 2 or 3.

What treatment will be offered?

The treatment is called a LLETZ (Large Loop Excision of the Transformation Zone).

The doctor or nurse will use a very small electrically operated wire loop to remove the

area of the cervix containing the abnormal cells. The area removed is then sent to the laboratory for examination. The laboratory will look to see if there is CIN present.

Will the treatment be painful?

Before the treatment a local anaesthetic will be injected into your cervix. This may sting for a second or two but your cervix will then be numb and the rest of the procedure should be painless. A nurse will be present to support you throughout.

What about after the treatment?

Painkillers such as Paracetamol can be taken for any discomfort. You should be fine to continue your day as normal afterwards, although a 'quiet' day at home would be ideal.

You will most likely have a blood stained discharge for a few days which may then change to a brownie colour. Following this you may have a pink watery discharge for about 3 weeks.

What are the possible complications?

Occasionally an infection may develop which will produce an offensive smelling discharge. This can be easily treated with a course of antibiotics from your GP. To enable the cervix to heal and to reduce the risk of infection we suggest that you **do not use tampons or have sexual intercourse for a month after treatment.**

Rarely heavy bleeding may occur and you may need to be seen by your GP, back at the clinic or in casualty if outside office hours.

About 1 in 20 women will need a repeat treatment at some time in the future. Therefore it is important to attend follow up appointments.

A single LLETZ treatment is unlikely to cause problems with your chances of getting pregnant in the future. Following treatment there may be a very slight risk of delivering future babies early, however, research suggests that the risk depends on the size of the area treated.

What do I do now?

Having read this information think about whether you would like treatment at this first appointment if it is necessary and possible.

You do not need to make a final decision now and you will not be encouraged to have treatment if you choose not to.

We have sent you this information so that you are aware of the possibility and can plan appropriately. We would suggest delaying treatment if you are due to travel abroad within a month.

Further information about having a LLETZ treatment can be found at: <https://www.jostrust.org.uk/information/cervical-cancer/treatments/surgery/lletz>

Written by Sue Ashman Nurse Colposcopist October 2014, updated by Lou Johnson Nurse Colposcopist July 2020

Select and Treat
your options explained

**Cardiff Colposcopy
Clinic**

University Hospital of Wales
Tel: 02921 8841860

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