Care after a treatment at colposcopy
Introduction
You have had a treatment to your cervix (neck of your womb) in the colposcopy clinic. This leaflet explains some of the symptoms you may experience after the treatment and offers some advice on what activities you should avoid.

Immediate advice after a treatment at colposcopy
- It is not unusual to have ‘period like’ discomfort or stomach cramps. This will normally settle down after a few hours.
- If you need to take pain relief, use the tablets you would normally take for a headache. Take this medication following the dosage instructions on the package.
- Take it easy for the first 24 hours and avoid heavy work or exercise such as vacuuming, golf or swimming for the first few days.
- It is normal to have a vaginal discharge for four to six weeks after a treatment at colposcopy. This discharge may be red-brown in colour at first and will change as healing takes place. If the bleeding is heavier than during your period, if it lasts longer than six weeks, or if you have a discharge that smells, you could have an infection and may need antibiotics. The signs of an infection may include having a fever (for example feeling hot, cold or shivering). If you feel like this, contact your GP or the colposcopy clinic where you had your treatment.

The results of your treatment at colposcopy
You should receive a letter explaining the results of your treatment at colposcopy in about six weeks. If you have any questions or concerns about your results, phone the colposcopy clinic where you had your treatment.

Follow-up after your treatment at colposcopy
Nine out of 10 women who have had a treatment at colposcopy will not need another treatment. However, women who have had a treatment are five times more likely to have smear tests that are not normal in the future compared to women who have always had normal smear tests.

You will need your first smear test six months after a treatment at colposcopy. The current recommendation is that you will need annual smear tests for up to 10 years, depending on the reason for the treatment. Your doctor can advise you on this.

Can having a treatment at colposcopy cause problems in any future pregnancy?
Any treatment has to involve a balance between removing any problem cells and minimising any possible harm.

The aim of the treatment is to remove as little tissue as possible while making sure the treatment is successful. The more of your cervix that is removed the less that remains to support future pregnancies. Your colposcopist (a person who carries out your treatment) will be aware of this and you should feel free to discuss any concerns you may have with him or her.

If you have had a number of treatments at colposcopy and are pregnant or considering a pregnancy, then speak to your doctor or obstetrician (a doctor who delivers babies). He or she may recommend that you have a special scan early in pregnancy to measure the length of your cervix. In most cases this length is normal, but if not your obstetrician may recommend a cerclage (a stitch in your cervix), to provide additional support. This is usually fitted under general anaesthetic when you are pregnant and removed while you are awake shortly before your baby is due.

If I smoke, does it mean that I will need further treatments for cells that are not normal?
Yes it may mean this. If you smoke, you should try to stop. This can be difficult, so if you need some help contact the National Smokers’ Quitline on Freephone 1850 201 203.