My test results came back as abnormal. What now?

If your CST results have come back showing high-grade squamous or glandular abnormalities, your health professional may refer you to a specialist for further testing. Some of the tests that you may come across are:



Colposcopy:

Your specialist will insert a speculum into your vagina for a clearer view of your cervix. The doctor may coat your cervix with fluid to highlight any abnormal cells, before using a colposcope, which looks like a pair of binoculars on a stand, to look at your cervix. The colposcope will not be put inside you. You should not feel pain during a colposcopy, although you may experience mild discomfort during the procedure.

Biopsy:

Your doctor may perform a biopsy at the same time as a colposcopy. A biopsy involves removing a small amount of surface cervical tissue to send to a lab for examination. You will be given a local anaesthetic, so you will not feel any pain during the procedure. You may experience some discomfort during and after the biopsy, similar to menstrual cramping, and some light spotting/bleeding or vaginal discharge for a few hours post-procedure. It is generally recommended that you don't have sexual intercourse or use a tampon for 2-3 days following to decrease chances of infection and to allow healing.



Loop Electrosurgical Excision Procedure (LEEP) or Large Loop Excision of the Transformation Zone (LLETZ):

Occasionally, a LEEP or LLETZ is performed at the same time as a colposcopy and a biopsy. This procedure is usually done under local anaesthetic, however, can also be done under general anaesthetic in a hospital, and can be used to remove tissue for examination as well as to treat cervical abnormalities. A thin, electrically heated wire will be used to remove abnormal cervical tissue. It may be possible to remove all abnormal cells using this technique. Post-procedure, you may experience mild spotting/bleeding and cramping, which should ease over the following weeks as your cervix heals. It is generally recommended that you do not use tampons or have sexual intercourse for 4-6 weeks following to allow time for healing and to prevent infection.

Laser therapy:

Laser therapy is performed with a local anaesthetic and involves the use of a laser to remove abnormal cells from your cervix. Side effects of this procedure are similar to those of LEEP/LLETZ procedures.

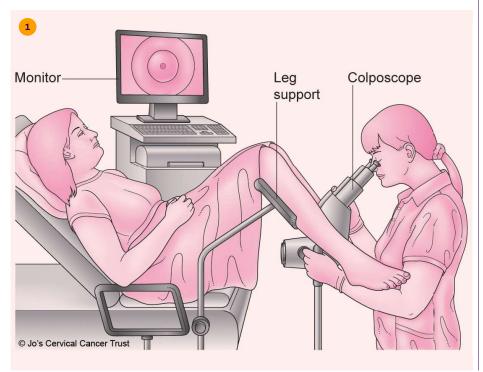


Image 1: Illustration of a colposcopy procedure.

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Cone biopsy:

A cone biopsy is a procedure in which a coneshaped piece of abnormal tissue is removed from the cervix. The procedure can be performed to determine how far pre-cancerous/cancerous cells have spread beneath the surface of the cervix and can also be used to remove early stage tumours.

This procedure is generally conducted in a hospital under general anaesthetic. You may experience spotting/bleeding and cramping for a few days post-procedure. It is recommended that you do not have sexual intercourse or use tampons for 4-6 weeks following, to allow time for healing and to prevent infection.

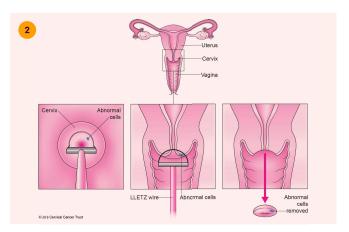
Although a cone biopsy or LEEP/LLETZ will not affect fertility, there may be a higher chance of premature birth or miscarriage due to a weakened cervix.

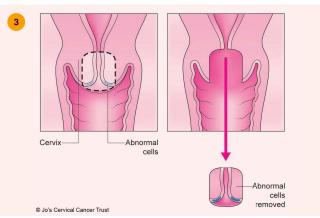


If you are planning to have children, talk to your specialist before the procedure. Some women who become pregnant after a cone biopsy choose to have stitches put into their cervix to strengthen it. These stitches are removed before the baby's birth.

Image 2: Illustration of a LEEP or LLETZ procedure © Jo's Cervical Cancer Trust

Image 3: Illustration of a cone biopsy procedure. © Jo's Cervical Cancer Trust







Kim's Story

Location: QLD Age at diagnosis: 40s

My diagnosis:

When I went to my gynaecologist to have my Mirena replaced, he asked how long it had been since my last CST. I had totally forgotten. We decided to do a CST then and there. Unfortunately, the results of the test came back with high grade lesions CIN 3

My reaction to the news:

I was a right mess. Luckily, I had a brilliant gynaecologist who set me straight, telling me not to stress that it is NOT cancer, but needs to be dealt with ASAP. I asked why I couldn't just have a hysterectomy and get the whole lot out. At this stage I was way past wanting more children, and I just wanted it all gone. He advised that an incorrect treatment could mean a worse outcome

My treatment journey:

I went in for a LLETZ/LEEP procedure to remove the abnormal cells, however, at my 3-month check-up the results came back with the same abnormalities. Off I went again

to have my first Cold Knife Cone Biopsy. Again at 3 months, I was still high grade CIN 2, so I had another Cold Knife Cone biopsy. I'm sure the guys at Redlands Mater knew me by name! At my next 3-month checkup, I was still CIN 3. I thought I was never going to be rid of this horrible thing living inside of me. In April 2015, I went in for my hysterectomy without removing my ovaries, to

Post-treatment recovery:

Since then, my recovery has been brilliant, and I've bounced back into normal life. I was given all clear margins and have had my 3-month check-up with no dramas. I'm now free of abnormalities and can go back to 5-yearly OSTs!

My tips for Australian women about cervical health:

Ensure you talk to your doctors, raise any concerns and don't be shy! Take the time to ensure you are looking after you!