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Having a vulval biopsy

This leaflet is for women having a vulval biopsy – a sample taken from the skin of the vulva. This sample will be sent off for examination under a microscope so that a diagnosis can be made.

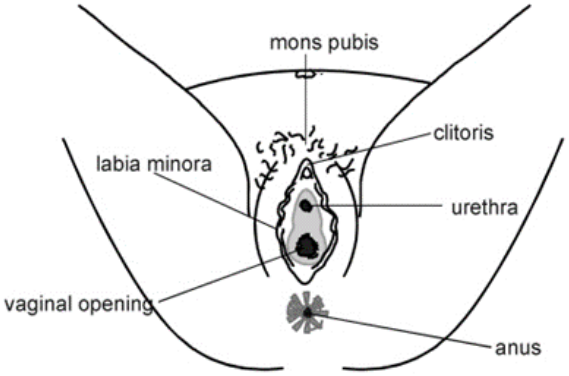
What is the vulva?

The vulva is the skin covered area of the female genitalia. It is made up of area surrounding the vaginal and urethral opening, which is called as vestibule, labia minora (vaginal lips), clitoris, labia majora (skin area outside vaginal lips) and pubic area.

Why do I need this biopsy?

Your gynaecologist has recommended you have a vulval biopsy because you have symptoms such as a rash, soreness or a lump on your vulva.

Some rashes and lumps can be diagnosed simply from the way they appear. Others are more difficult to diagnose, and a tissue sample is needed. If this is the case, a biopsy needs to be taken from the vulva.



FEMALE PERINEUM

How is the biopsy carried out?

The procedure may be performed under a local anaesthetic (i.e. the skin is numbed using an anaesthetic injection), but if your vulva is very sore, a short general anaesthetic (i.e. you are asleep) is recommended.

A sample of the abnormal area of skin on your vulva can then be taken and sent to the laboratory for analysis.

You may need a small, dissolvable stitch to close the skin from where the sample has been taken.

What are the risks of a vulval biopsy?

A vulval biopsy is a very quick, simple and safe procedure without significant risks. It is possible that you might get some bruising at the biopsy site, but this is rare and will settle on its own.

What are the benefits of the biopsy?

If you have a small area of abnormal skin on your vulva, the biopsy may completely remove it, so giving both a diagnosis and treatment (i.e. removal) at the same time.

Larger areas of rash or soreness cannot be removed totally by the biopsy, but the diagnostic sample will give a diagnosis so treatment can be planned.

What to expect after the biopsy

A vulval biopsy is a minor procedure, but it is on a very sensitive area of the body.

- **Discomfort** – you will be given an injection of local anaesthetic to numb the skin for a few hours, but when this wears off, you might be a bit sore. Take some paracetamol or ibuprofen for a day or two.
- **Activities** – you should feel fine almost immediately afterwards, but activities such as cycling and sexual intercourse should be avoided for the first week or so as they may be uncomfortable.
- **Bathing** – avoid soaking in a bath for the first week after the biopsy as it will make the stitches go soggy and may delay healing. You should either shower or gently wash your genital area whilst kneeling in the bath. It is important that you dry off well – make sure you pat the area gently rather than rub with a towel to avoid aggravating the site.

How and when will I receive my results?

Following your biopsy, the clinic doctor will contact you and your GP with your results by letter. This can take up to six weeks. We are unable to give your results out over the phone.

Do I need to see the doctor again?

You may not need to see the doctor again. Following your biopsy, the doctor will contact you by letter to discuss whether any further treatment is necessary.

Useful contacts

We hope that this information has been useful for you. If there is anything you do not understand or if you have any questions, please ask the clinic nurse or telephone us on 0118 322 7181 Monday to Friday (9am to 5pm) or 0118 322 8204 outside of these hours including weekends and Bank Holidays.

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Gynaecology Consultant, July 2014
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