

Community Reproductive Endocrinology

Endometrial Biopsy

What is an endometrial biopsy?

As with any biopsy, a sample of tissue is obtained for analysis. Specifically, a small piece of the tissue lining the endometrial cavity is removed. In most cases, a thin flexible plastic catheter is utilized to perform the procedure.

When is an endometrial biopsy recommended?

Your physician may recommend that an endometrial biopsy be done to evaluate the following conditions:

- Irregular or abnormal uterine bleeding
- Recurrent pregnancy loss
- Infertility
- Suspected uterine infection

How do I schedule my endometrial biopsy?

Your test will be scheduled according to the indication for the test. In some instances, e.g., as part of an evaluation for recurrent pregnancy loss, the test must be coordinated with when ovulation is thought to have occurred. The nursing staff will assist you in scheduling your biopsy.

Does an endometrial biopsy hurt?

Discomfort experienced with the procedure will vary from mild to moderate cramping in most cases. Occasionally, some woman experience more significant discomfort.

Fortunately, the procedure is over very quickly (usually in 10-15 seconds after the catheter is inserted into the uterine cavity) and medications are available that can make the procedure more comfortable.

The physician performing the procedure will be very gentle to minimize any discomfort that you might experience. Also, the biopsy instruments used in most cases are thin flexible plastic catheters that are much more comfortable than the biopsy instruments used in the past.

What are the risks of an endometrial biopsy?

- Uterine puncture or perforation
- Pelvic organ infection
- Interruption of pregnancy

The above listed risks are theoretically possible, but very rarely occur - no more frequently than 1% or 1 in 100 procedures. Every effort is made to minimize these risks. Sterile technique is used to reduce the risk of infection. The position of the uterine cavity is determined prior to inserting the catheter to reduce the risk of puncture. In some cases a pregnancy test will be done prior to the biopsy to minimize (but not guarantee) the chances of interrupting a pregnancy. If a pelvic infection occurred, antibiotics would be utilized, possibly in conjunction with hospitalization to treat such an infection. In rare cases, such pelvic infections can result in loss of fertility or even sterility.

Instructions:

- **If you are not allergic or sensitive to such medications, please take 600 – 800 mg. Ibuprofen (Motrin, Nuprin or Advil) about 1 hour prior to your scheduled biopsy. Other products such as Tylenol do not work as well.**
- If your biopsy is being done for infertility or recurrent pregnancy loss, please make a note of your next menstrual period so that you can provide us with that information.
- Depending upon which laboratory your sample is sent to, your results should be available in 7 – 10 days. If you have not heard from us in 2 weeks please check with the office.
- Due to the betadine antiseptic used during the biopsy you may experience some brownish-reddish discharge following your procedure.

When should I call?

- Fever of 100.4 F or greater lasting for 4-6 hours
- Worsening or persistent abdominal or pelvic pain
- Heavy or persistent vaginal bleeding

Please call our office if you have any concerns or questions following your endometrial biopsy.

317-621-0600