



Improving lives through the prevention and treatment of anogenital & HPV-related diseases

PATIENT RESOURCES

Vulvar Biopsy

Why is it done?

A vulvar biopsy may be done if you have changes in the skin of the vulva, the skin outside the vagina (external genitalia), and your doctor or healthcare professional wants to have the skin examined by a pathologist to determine the exact diagnosis and treatment plan for you. Sometimes a vulvar colposcopy is done before the biopsy. This means that the provider will look closely at your vulva using a bright light and magnification after applying a liquid (acetic acid, or vinegar) that makes abnormal tissue easier to see. If the provider sees anything abnormal, he or she will usually take a biopsy.

What should I do to prepare for a vulvar biopsy?

You do not need to do anything special to prepare for a colposcopy or biopsy. The procedure can be done if you have had sex recently or if you have light bleeding, like the beginning or end of your period. If your bleeding is very heavy, or if you prefer, you may want to call your provider's office to see if you need to reschedule.

How is the biopsy done?

The provider will inject a small amount of numbing medication (lidocaine) into your skin. The injection may sting, but then you will not have any pain when the biopsy is done. After you are numb, the provider will remove a small piece of skin. Usually a medication, called silver nitrate, is used to stop any bleeding. Sometimes your provider might use stitches.

What happens after the biopsy?

The tissue will be sent to a laboratory to be microscopically examined by a pathologist. Further management will be determined based on the results which can take up to one to two weeks. At the time of the procedure, your provider will let you know if you should call for results, if their office will call you, or if the results are to be discussed at a subsequent appointment. If you have not heard about your results as planned, be sure to call. Because of the biopsy procedure, you may experience some bleeding or spotting from the biopsy site. If stitches were used, these dissolve on their own, usually in about two to three weeks. If a silver nitrate stick was used to prevent bleeding, this may cause some discoloration at the site of the biopsy. Your physician will tell you which has been used.

Once the Lidocaine has worn off you should experience only mild discomfort. Depending upon the location of the biopsy, the area may be sensitive for 7-10 days. Ibuprofen 400-600 mg may be used to control pain. Your provider may also recommend soaking the area twice a day in warm tap water. Some people find it helpful to carry a water bottle to rinse the area after using the bathroom. If any heavy bleeding or other symptoms occur to cause concern, you should call your provider's office.

ASCCP is a professional society for an interdisciplinary group of healthcare professionals including physicians, physician assistants, nurse practitioners, midwives and researchers, who are focused on improving lives through the prevention and treatment of anogenital and HPV-related diseases. For more information visit www.asccp.org.