



My Health
Digest

What are uterine polyps?

Uterine polyps are growths that occur in the endometrium, the inner lining of the uterus (the organ in which a fetus grows). For that reason, they are sometimes called endometrial polyps.

Uterine polyps are formed by the overgrowth of endometrial tissue. They are attached to the endometrium by a thin stalk or a broad base and extend inward into the uterus. The polyps may be round or oval, and range in size from a few millimeters (the size of a sesame seed) to a few centimeters (the size of a golf ball), or larger. There may be one or several polyps present. Uterine polyps are usually benign (noncancerous), but they may cause problems with periods (menstruation) or the ability to have children (fertility).

Who is affected by uterine polyps?

Uterine polyps are more likely to develop in people who are between 40 and 50 years old than in younger people. Uterine polyps can occur after menopause but rarely occur in people under 20 years old.

Your chances of developing uterine polyps may increase if you have overweight/obesity or have high blood pressure (hypertension).

What causes uterine polyps?

The exact reason that polyps form is unknown, but swings in hormone levels may be a factor. Estrogen, which plays a role in causing the endometrium to thicken each month, also appears to be linked to the growth of uterine polyps.



What are the symptoms of uterine polyps?

The symptoms of uterine polyps include the following:

- Irregular menstrual periods
- Unusually heavy flow during menstrual periods
- Bleeding or spotting between periods
- Vaginal spotting or bleeding after menopause
- Infertility

How are uterine polyps diagnosed?

The tests may include the following:

- **Transvaginal ultrasound:** this is a procedure in which a slim handheld device called an ultrasound transducer is inserted in the vagina. The device emits sound waves, which provide an image of the interior of the uterus, including any irregularities that may be present.
- **Sonohysterography:** this is a related procedure that may be performed after the transvaginal ultrasound. A sterile fluid is introduced into the uterus through a thin tube called a catheter. The fluid causes the uterus to expand, providing a clearer image of any growths within the uterine cavity during the ultrasound procedure.
- **Hysteroscopy:** this may be used to either diagnose or treat uterine polyps. During this procedure, a doctor inserts a long, thin tube with a lighted telescope (hysteroscope) through the vagina and cervix into the uterus. The hysteroscope allows the physician to examine the inside of the uterus. Hysteroscopy is sometimes used in combination with surgery to remove the polyps. See image below.
- **Endometrial biopsy:** the doctor uses a soft plastic instrument to collect tissue from the inner walls of the uterus. The sample is sent to the laboratory for testing to determine if any abnormalities are present.



- **Curettage:** done in an operating room, this procedure can both diagnose and treat polyps. The doctor uses a long metal instrument called a curette to collect tissue from the inner walls of the uterus. The curette has a small loop on the end that allows the doctor to scrape tissue or polyps. The tissue or polyps that are removed may be sent to the laboratory for testing to determine if cancer cells are present.

How are uterine polyps treated?

Treatment may not be necessary if the polyps do not cause any symptoms. However, polyps should be treated if they cause heavy bleeding during menstrual periods, or if they are suspected to be precancerous or cancerous. They should be removed if they cause problems during pregnancy, such as a miscarriage, or result in infertility in people who want to become pregnant. If a polyp is discovered after menopause, it should be removed. (This is called a polypectomy.)

