

Patient Advice and Liaison Service (PALS)

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Macluumaadkaan waxaa loo heli karaa qaab kale, sida ugu akhrinta ugu fudud, ama far waa weyn, waxana laga yabaa in lagu heli luuqaado Kale, haddii la codsado. Wixii macluumaad dheeraad ah, kala hadal kooxda xarunta caafimaadka.

Bu bilgi, kolay okunurluk veya büyük baskılar gibi alternatif biçimlerde sunulabilir, ve talep üzerine Alternatif Dillerde sunulabilir. Daha fazla bilgi için klinik ekibinizle irtibata geçin.

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Patient information

Endometrial ablation

What is endometrial ablation?

Endometrial ablation is treatment to thin or remove (ablate) the womb lining (endometrium) in an effort to treat heavy periods. It may not reduce pain unless the pain is associated with the passage of blood clots.



What happens during endometrial ablation?

The procedure is performed under general or local anaesthesia¹. Your legs are placed on stirrups and the doctor will pass a narrow instrument (probe) via the vagina and cervix into the cavity of the uterus (womb). The machine is activated and radiofrequency/heat energy destroys the endometrium (the lining of the uterus) with the aim that the periods become very lighter or stop completely.

The endometrium can be ablated in the following ways:

1. Novasure destroys the lining of the womb with electrical energy.
2. Thermal balloon ablation - the lining of the womb is destroyed by using a balloon-like device filled with hot fluid.
3. Transcervical resection of endometrium- shaving away the lining of the womb with a heated wire loop under direct vision with a hysteroscope (thin telescope).

Your doctor may use any of these techniques for your operation. There is no difference in the end result.

Contraception and fertility

You should not have this procedure unless you have completed your family. The operation may complicate a pregnancy if you did conceive and may make you infertile. However it does not reliably prevent pregnancy so if you have not previously had a sterilisation operation, you will need to continue using some form of contraception.

What are the risks of endometrial ablation?

The procedure is minor and safe. However, there are some risks associated. You can expect vaginal discharge, pain and some bleeding post operatively.

More serious risks include:

- Damage to the womb
- Damage to bowel, bladder or major blood vessels
- Very occasionally it is not possible to proceed with the operation as the intrinsic safety checks in the machine are not passed and the machine cuts out (<1%).

Depending on the extent of the injuries, you may require a laparoscopy (key hole surgery) or laparotomy (cut on your tummy) to repair the injuries.

What happens after endometrial ablation?

You will return to the ward to recover for a few hours. Unless there have been unexpected complications, most women are well enough to go home on the same day of the procedure. You will need to arrange for someone to drive you home. It is advisable to have a friend or family stay with you for the first 24 hours.

You can expect some vaginal bleeding for a few days after your operation. This is usually like a light period. The bleeding will gradually lessen and become like a heavy discharge, and may darken in colour. For some women this discharge may last for 3 to 4 weeks¹. You should use sanitary towels rather than tampons. It is advisable to wait until your vaginal bleeding has stopped before you resume sexual intercourse.

You may experience period-like cramps. Take it easy for the first 2 days and take pain killers regularly to help cope with the pain. As it takes time for the anaesthetic to wear off, please do not drink alcohol, drive or operate machinery for 48 hours after your operation¹. You should be able to return to normal activities after 48 hours.

When to seek help¹

- 1) Burning or stinging on passing urine
- 2) Heavy or prolonged bleeding
- 3) Offensive vaginal discharge
- 4) Develop a temperature or shivering

Alternative options to endometrial ablation

- No treatment
- Tablets to reduce bleeding
- Mirena Coil (a specific type of intrauterine device that releases a small amount of progesterone hormone)
- Hysterectomy (a major operation removing the womb entirely)