



When Is Menstrual Bleeding Too Heavy?

Normally, women menstruate once a month for 3-7 days. The average blood loss is less than 2 ounces. *Menorrhagia* (excessive menstrual bleeding) is defined as heavier than normal and/or longer lasting periods. If you need to change pads or tampons more frequently than usual or you are losing more than 2 ounces of blood during your period, you have menorrhagia.

Menorrhagia is more than just having to cope with excessive bleeding. It can have very disruptive effects on your daily activities, your mood, your family and social life. Menorrhagia occurs in 1 out of every 5 women. Yet most women do not seek help. Why? Reasons frequently given include embarrassment, fear of treatment options (e.g. a hysterectomy) or they think their bleeding is “normal” because ‘it has always been heavy’. When menorrhagia is associated with increasing PMS symptoms, a woman frequently feels she has only one good week each month when she feels great and energetic.

There are many causes of menorrhagia. Heavy menstrual bleeding may be due to hormonal abnormalities in the ovary or thyroid gland, uterine problems including fibroids and/or polyps, or an abnormal pregnancy. Often the cause is an abnormal endometrial lining of the uterus. Any new onset or recurring excessive bleeding (more than 2 ounces per cycle) should be evaluated to determine the cause, including an accurate history, complete physical exam, specific laboratory studies and a pelvic ultrasound. A sampling of the endometrial lining and/or an office hysteroscopy (to view the cavity of the uterus) may be indicated.

Treatment options depend on the cause of your heavy bleeding and whether you have completed your childbearing. When the cause is abnormal functioning of the endometrial lining of the uterus, there are generally two types of approaches to eliminate heavy menstrual flow, painful cramps and emotional PMS symptoms: One is *temporary* and the other is more *permanent*.

- **Temporary** methods include the use of hormones (most frequently, birth control pills) or the insertion of a hormone-releasing IUD (Intrauterine Device).
- **Permanent** methods include a simple procedure that removes the endometrial lining of the uterus called an *endometrial ablation* or by a vaginal hysterectomy.

Most women who have completed childbearing will often choose an endometrial ablation, which will permanently stop heavy bleeding and decrease or eliminate menstrual cramps and lessen the emotional symptoms of PMS.

Click on the following link to learn more:

www.gunntowbincenter.com/gunn-towbin-center-health-topics.php

