

ENDOMETRIAL ABLATION

“No More Periods” - An Alternative to Hysterectomy for Women with Excessive Menstrual Bleeding

Women who have menstrual periods that interfere with the quality of their life and who have completed their childbearing, now have a simple alternative - **Endometrial Ablation**.

Endometrial ablation may be a permanent option to attempting to regulate menstrual flow with birth control pills, hormones or a hysterectomy. During the monthly menstrual cycle the endometrium, or lining of the uterine cavity, builds up and then sheds. This shedding of the endometrium constitutes the menstrual bleeding portion of the cycle and normally lasts 3-5 days. Most women lose about 1/4 cup of blood during their period. Losing too much blood can lead to anemia (due to lack of iron in the blood). It can also interfere her ability to plan her life and comfortably participate in many activities, including intercourse and/or result in embarrassing moments. Some women choose ablation to simply eliminate the inconvenience of future menstrual periods.

Endometrial ablation is an outpatient procedure resulting in the permanent removal of the thin endometrial lining in the cavity of the uterus, which is the source of bleeding. Patients may resume their normal activities the next day. According to recent studies, most women feel that endometrial ablation relieves problems with periods and 90% of women who have this procedure are very satisfied with the results. 60-80% of women report that their menstrual periods stopped completely after endometrial ablation. Some women will still have slight bleeding or spotting. If ablation does not control heavy bleeding, a repeat ablation will most often be successful. It is important to note that endometrial ablation does not affect a woman's normal hormonal cycle. Additional benefits of endometrial ablation include a reduction or elimination of menstrual cramping associated with the periods and a significant reduction in the emotional symptoms associated with premenstrual syndrome or “**PMS**”.

Excessive uterine bleeding (**menorrhagia**) is a common problem with multiple causes. Menorrhagia may be due to hormonal disturbances endometrial polyps, excessive overgrowth of the endometrial lining, uterine fibroids or cancer. Medical conditions such as bleeding disorders or thyroid disease may also contribute to excessive uterine bleeding. When a specific cause for abnormal bleeding is identified treatment can be directed towards resolving that cause. When no specific cause is identified or if hormonal disturbances do not improve with hormone therapy, endometrial ablation can be an excellent alternative to a hysterectomy.

The ovaries are not affected by endometrial ablation. The regular cycle of circulating hormones (estrogen and progesterone) continues in a normal manner. Endometrial ablation will prevent any further childbearing; therefore, patients who may wish to have children in the future should not consider this procedure.