

## WHEN A WOMAN'S PERIOD IS TOO HEAVY AND PROLONGED

Abnormally heavy and prolonged menstrual bleeding, also known as menorrhagia, affects one (1) in five (5) women. Abnormally heavy and prolonged menstruation limits daily activities for some women because women who have this condition experience severe cramps and staining of clothes which may cause embarrassment.

### Factors and Causes

One of the causes of heavy and prolonged menstrual bleeding is uterine growths, such as fibroid tumors, endometrial polyps, and adenomyosis. Studies have also revealed that approximately fifty percent (50%) of women who experience abnormally heavy and prolonged menstruation have been diagnosed with iron deficiency anaemia. In some instances, there is no apparent cause for this condition.

### Treatment Options

Relief is now in sight because there are minimally invasive procedures to treat heavy and prolonged menstrual bleeding for women who are concerned with this condition. Traditionally, the only way to correct heavy menstrual bleeding was to have a hysterectomy, an extremely invasive procedure involving the partial or complete removal of the uterus.

**Now, women have 2 less-invasive options to choose from as discussed below.**

- (1) Medical therapy (non-steroidal anti-inflammatory agents, anti-fibrinolytic agents, and hormone therapy) coupled with levonorgestrel releasing intra-uterine system have proven to be effective because a survey revealed that only five percent (5%) of women continued with medical therapy after five (5) years.
- (2) A majority of women need to resort to surgical treatments such as an endometrial ablation instead of medical therapy. This less invasive procedure is available to women who have no major anatomical deformity of the uterus. The principle of endometrial ablation is to destroy the base layer of the uterine lining (known as the endometrium) which regenerates in every menstrual cycle to cause menstruation. First, various endometrial ablation devices – diathermy, radiofrequency, thermal balloon, microwave or cryotherapy – are inserted into the uterine cavity through the cervix. Then, energy is used to destroy the base layer of the endometrium.

There are numerous benefits in opting for an endometrial ablation over a hysterectomy: short surgery period (one-day procedure), no surgical scarring, and no adverse effects on ovarian function.

It is important to keep in mind that a significant portion of women will have no menstruation after the endometrial ablation procedure, while others will have much less or minimal menstrual flow. Therefore, because endometrial ablation affects childbirth permanently, women who want to bear children should do so before electing to undergo this procedure. Furthermore, the endometrium should be assessed to exclude malignancy.

### Helpful Questions

It is important for women to be aware of their menstrual flow and cycle to determine whether they have menorrhagia. The following questions are helpful in assessing a woman's menstrual cycle:

- How often do you get your period?
- How long does your period last?
- In the first 3 days of your period, how many tampons and/or pads do you go through in an hour?
- How often do you have to get up at night to change your tampon/pad?
- How often do you find that you bleed through your protection, including your clothes?
- How often do you have blood clots in your flow when you are menstruating?
- How often are you afraid to leave the house or go out in public when you have your period?
- How often does your menstrual bleeding cause you to avoid social, sexual or sports activities?
- How often does your menstrual bleeding cause you to miss work?



**Dr. Selina Pang**  
Specialist in  
Obstetrician and Gynaecologist

#### Endometrial Ablation Devices Thermal Balloon



#### Endometrial Ablation Devices Radiofrequency

