Heavy Periods (Menorrhagia)

It affects approximately 22% of all menstruating women. In England, around one in 20 women aged 30 to 49 years see their GPs each year because of heavy periods. There is a range of effective treatments and the National Institute for Health and Clinical Excellence (NICE) recommends that women are provided with evidence-based information about their treatment options prior to considering a major operation such as hysterectomy. Hysterectomy can be associated with significant complications even if only in a small number of cases. Alternative effective treatments to hysterectomy such as Thermachoice Balloon Ablation are available for women with heavy periods, particularly for those who have a normal uterus.

What is Thermachoice balloon ablation?

This is a quick outpatient treatment for heavy periods which destroys the endometrium (lining of the womb). Patients benefit from a rapid recovery period, and most women will experience light or no periods after the procedure. Unlike a hysterectomy which takes out the entire uterus (womb), this procedure just destroys the lining of the uterus by the use of heat. This is also known as endometrial ablation.

Why should I choose to have a Thermachoice balloon ablation?

If you have heavy periods that are affecting your life, and you do not have other problems that require a hysterectomy you should consider endometrial ablation. You should also consider the procedure if you experience bleeding that causes you to become anaemic and tired, have bleeding that affects your day to day activities and work, and if you no longer wish to have more children. What you do about heavy periods will depend on how far it affects you and what you feel you can cope with as well as your general health.

How does Thermachoice work?

First, a soft, flexible balloon attached to a thin catheter (tube) is inserted into the vagina, through the neck of the womb (cervix) and placed gently into the cavity of the womb. The balloon is then filled with fluid so that it inflates to fit into the cavity of the womb. The fluid is then gently heated to 87°C and stays in the womb for eight minutes while the lining of the womb is treated.

When the treatment is completed, all the fluid is withdrawn from balloon and it is taken out of the womb. Nothing remains inside the womb. The lining of the womb comes away like a period over the next seven to ten days.

What will I feel during the procedure?

Thermachoice balloon ablation can be performed as an out-patient procedure. You will be awake during the procedure, and you may experience some cramping and discomfort like severe period pains. To minimise the cramping, you will be given some medication. This will include 2 suppositories (tablets to place in your back passage), Diclofenac, (an anti-inflammatory similar to Brufen/Ibuprofen) one to be used the night before the procedure and the second on the morning of the procedure.
There will also be two tablets, co-dydramol (contains Codeine and Paracetamol), to take about an hour before the procedure. Sometimes patients want to be "put to sleep" using general anaesthesia after which you may experience some nausea. This is an option for you to discuss with your consultant.

**What will I feel after the procedure?**
You may feel mild or moderate cramping period like pain.

**What happens after the procedure?**
After one to four hours resting on the ward or recovery area, you will be able to go home. You should arrange to be driven home where you should take it easy for the rest of the day.

Your first few periods after the procedure may continue to be heavy but will improve thereafter. Some women experience a pinkish-white discharge for about two weeks after, although that can occasionally last up to a month.

Intercourse and very strenuous activity should be avoided for two weeks. Following a general anaesthetic, you should not drive or operate machinery (including kitchen equipment) for 24 to 48 hours.

**Is this treatment effective?**
Most women will have lighter or no periods following Thermachoice endometrial ablation, and up to half will stop having periods. Younger women are less likely than older women to respond to this procedure. After Thermachoice endometrial ablation, younger women are more likely to continue to have periods.

It is known that 93% of women are satisfied with the results five years after treatment. A small percentage of patients will still eventually need a hysterectomy, but the vast majority will not.

**Are there any complications of the procedure?**
As with any treatment, there are some risks associated with this procedure. These include:
- Not advisable for women who have not completed their family.
- Infection, which is usually easily managed with antibiotic tablets.
- Bleeding

Very rare risks include:
- Heat burn of internal organs and electrical burn (as electricity is used to heat the fluid in the balloon). This is extremely rare due built in safety mechanisms
- Perforation of the wall of the uterus.
- Leakage of heated fluid from the balloon into the cervix or vagina.

**Are there any other options available for heavy periods?**
Yes
- Hormonal treatment including contraceptive pills for younger women
- Pill injection (Depoprovera Injection)
- Mirena intrauterine system (a coil loaded with hormone)
- Cutting away the lining of the womb, Trans Cervical Resection of the Endometrium (TCRE)
- Minitouch endometrial ablation (described in its own leaflet). The treatment time is shorter than Thermachoice but it is a newer procedure so long term effects are not so well studied
- Hysterectomy

Can I have this procedure?
You can have this procedure if:
- You have heavy periods but prefer not to take hormonal treatment or medical treatment has failed.
- You have not gone through the menopause.
- You have not had more than one caesarean section
- You have completed your family
- You are using effective long term contraception or if you are sterilised or you partner has had a vasectomy (the snip)

Are there any contraindications (reasons not to have) this procedure?
There are few contraindications for this procedure. These include:
- If you ever want children. Pregnancy after the procedure can be dangerous for both you and your baby. Since there is a chance that pregnancy could occur, effective contraception or sterilisation should be considered before treatment and you should discuss this with your doctor in detail before you decide to have Thermachoice balloon ablation.
- Cancer or precancerous condition affecting lining of the womb
- The procedure is relatively contraindicated if you had 2 or more deliveries by caesarean sections.
- If you have a latex allergy

When should I call a doctor?
A follow-up appointment is not automatically booked as the success rate of operation is very high and complications are rare. However, you should call your GP if you develop:
- Fever greater than 38°C.
- Worsening pelvic pain not relieved by pain killers (Paracetamol).
- Nausea and vomiting.
- Bowel or bladder problems.
- Greenish vaginal discharge.

In an emergency you can contact Gynaecology Emergency Room in Swinley Ward on 01942 822568, 01942 822569 or 01942 822072.
Comments, Compliments or Complaints

The Patient Relations/PALS Department provides confidential on the spot advice, information and support to patients, relatives, friends and carers.

Contact Us

Tel: 01942 822376 (Monday to Friday 9am to 4pm)

The Patient Relations/PALS Manager
Wrightington, Wigan and Leigh NHS Foundation Trust
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In addition to the Patient Relations/PALS Service, you can contact HELPline on 01942 822111.

This leaflet is also available in audio, large print, Braille and other languages upon request. For more information call 01942 773106.