Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

NovaSure Endometrial Ablation for the Treatment of Heavy Periods

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Patient Information

Obstetrics & Gynaecology Service

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NovaSure Endometrial Ablation

Your doctor has recommended an endometrial ablation procedure to improve your symptoms of heavy periods. This leaflet will give you information about NovaSure, to help you make an informed decision based on the risks and benefits of the procedure. Your gynaecologist can explain alternative treatment options for your heavy periods, and help you decide if NovaSure endometrial ablation is right for you. If you have any further questions, please use the contact information provided in this leaflet.

What is an endometrial ablation procedure?

Endometrial ablation is a treatment to remove the lining (endometrium) of the womb (uterus) to relieve the symptoms of heavy periods (menorrhagia). For women who have completed their family and have heavy periods, endometrial ablation is another effective treatment that is less invasive than a hysterectomy. It also has fewer complications and quicker recovery compared to hysterectomy. After the procedure, most women experience a noticeable reduction in their periods and in some cases, periods stop completely.

What is NovaSure?

NovaSure endometrial ablation is a well-established method of treating the lining of the womb using radiofrequency via a “heated mesh”. It is a one-time, five-minute procedure which can be performed as an outpatient or an inpatient (in theatre). Many women choose to have the procedure as an outpatient, because of the tolerability, and because the treatment takes a considerably shorter period of time.

What are the benefits of NovaSure?

- The procedure is quick and usually takes less than 5 minutes.

- It can be performed as an outpatient, reducing the total appointment time.
- It is a one-time procedure.
- It can be performed at any time during your menstrual cycle.
- It does not involve any incisions (cuts to your body).
- You don’t need to take any pre-treatment hormonal medication.
- 91% women report a successful reduction in bleeding or their periods completely stopping within 1 year.
- You are awake for the procedure, which avoids any risks associated with general anaesthetic.
- If you wish, someone may accompany you and sit with you during the procedure.
- There is no need for recovery on the ward, you may leave a short time after the procedure.

What are the drawbacks?

- You must have completed your family, as pregnancy following ablation is not advised.
- It is not a form of contraception, and you will still need to use contraception to avoid pregnancy.
- It is not reversible.

- You may still have periods; however, they should be significantly lighter.

What are the risks?

Potential risks include:

- Uterine perforation: Very rarely, insertion of the device may be difficult and a false passage may be made into the muscle of the womb. Even more rarely, this may then cause injury to the organs within the abdomen and surrounding the womb. This may require the procedure to be abandoned, the injury to be repaired, and a course of oral antibiotics to be prescribed. Reported cases are less than 0.1%.

- Infection: After the procedure, if you begin to feel unwell or notice an offensive discharge, please contact us on the contact information provided, or seek help from your GP.

- Incomplete/abandoned procedure due to pain: as you will be awake, if you are unable to tolerate the pain, we may stop the procedure.

How does NovaSure work?

- The doctor opens the cervix (neck of the womb) slightly and passes a thin wand which extends into a triangular-shaped netted device.

- The netting expands, fitting to the size and shape of the uterus.

- Precisely measured radiofrequency energy is delivered through the netting for around 90 seconds.

- The netting device is retracted back into the wand, and both are removed from the cervix.

What should I expect?

Before the procedure:

You will be given painkillers to take beforehand, to reduce discomfort. We will also ask you to do a pregnancy test to ensure there is no possibility of pregnancy before starting. After you are comfortably settled on the couch, a hysteroscopic examination (a mini telescope) may be used to look inside your womb to ensure everything is ok.

During the procedure:

You may bring someone with you to sit beside you during the procedure. The gynaecologist will perform the procedure, and there will be a nurse who is also able to offer you support. Prior to the procedure, your doctor will examine you with a speculum and administer local anaesthetic to the cervix, which will help make you feel more comfortable. After gently introducing the NovaSure device, it will assess the cavity of your womb to help decide what settings the machine should be on. Once the cycle has started, you may experience some cramping, or may be completely pain free. The cycle takes approximately 5 minutes.

After the procedure:

You may feel well enough to go home immediately after the procedure. However, you may like to wait in our recovery area for a short period before you leave. You will be given painkillers to take home with you or advised to take regular over the counter painkillers. Afterwards, you may experience a watery discharge or light bleeding for some days/weeks later. This is completely normal, but if you do notice that this loss becomes offensive, or you start to feel unwell, please use the contact information provided, or seek help from your GP. We advise giving your body 3 months to fully heal following the procedure, and this is when you will see the full effects of the treatment.

If you wish to have the treatment but think you would rather be asleep for the procedure, your doctor can discuss referring you to have the ablation done in theatre. This may also be the case if you are unable to tolerate the procedure as an outpatient.

Are there any alternatives to Novasure?

Your doctor will have discussed alternative treatments for heavy periods, as an endometrial ablation may not be right for everyone. You can ask for more information about these treatments, but briefly they are:

Medical:

- Non-hormonal: Tranexamic acid
- Hormonal: Mirena coil, combined hormonal contraceptive pills, cyclical progestogen pills

Surgical:

- Hysterectomy



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