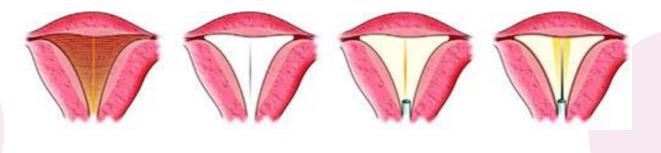
Information for Patients

Outpatient Endometrial Ablation Service

What is an endometrial ablation?

Endometrial ablation is a procedure used to treat heavy periods using a minitouch or novasure device. The procedure removes the lining of the womb by delivering heat energy using a small soft device. 80-90% of women experience lighter periods after ablation and periods may stop for some women.



The electrode array expands to conform to the contours of each patient's uterine cavity Cavity Integrity Assessment is performed using a small amount of CO2 The procedure delivers bipolar RF energy until the ablation is complete; approximately 90 seconds The electrode array is retracted for easy removal, leaving the uterine lining desiccated down to the superficial myometrium

Before your procedure

As you will not be having a general anaesthetic, you do not need to fast for this procedure. It is important that you have breakfast or lunch before you attend for your appointment.

You need to **provide an early morning urine sample** to perform a pregnancy test upon arrival. If there is any possibility that you may be pregnant, your procedure will be cancelled. It is important that there is no chance that you are pregnant. If you are sexually active, you must be using reliable contraception or have refrained from sexual intercourse for at least 4 weeks.

Please take pain relieving medication as discussed during your consultation. If you are able to take **Paracetamol**, we recommend **1 gram** approximately 60 minutes before your appointment.

Please arrive 30 minutes before your appointment as you will be counselled and offered further pain-relieving medication and anti-sickness prior to your procedure.

If you are on regular pain relief medication for another condition, please continue with this; do not take both. Failing to take adequate analgesia may lead to delays or cancellation of your appointment.



What happens during the procedure?



A speculum will be inserted into the vagina (like when you have cervical screening). This is in order to see your cervix (the opening of the womb). You will be given local anaesthesia to numb the neck of the womb and will be offered Entonox (gas and air). The ablation device is inserted into the womb. The lining of the womb is warmed gently using precisely calculated heat energy. The treatment lasts approximately 60-90 seconds and most women report cramping like pain during this time. After the procedure is completed, the device is removed. The doctor will then look into your womb using a hysteroscope. This is a thin telescope-like device that is placed into your womb through your cervix and shows the image of the inside of your womb on a screen.

What to expect?

The out-patient procedure is performed at Saint Mary's Gynaecology Treatment Centre. In the room there will usually be three members of staff; the doctor performing the procedure and two members of our nursing team. As we are a teaching hospital, it is possible that a trainee may also be in clinic. If you would prefer not to have a trainee present, please inform a member of staff.

How will you feel after the procedure?

Before you go home your nurse will provide you with the times that you may take further doses of painrelieving medication if required once home. During the first 24 hours, you might experience cramping type pain, nausea, or brown discharge. Most women will feel back to normal within two days after the procedure. You should avoid activities such as swimming, taking a bath (you can shower), sexual intercourse and using tampons for at least two weeks to avoid the risk of infection.

You should seek medical attention if you develop a fever of 38°C or above, worsening pain that does not improve with pain relieving medication, severe vomiting that you are unable to tolerate fluids, shortness of breath, bowel or bladder problems and/or greenish or offensive vaginal discharge. This could be via your GP or the Emergency Gynaecology Unit at Wythenshawe Hospital.

What are the main side effects of the procedure?

Endometrial ablation is a safe procedure. There is a small risk that you may experience vaginal bleeding), vaginal discharge, nausea (&/or vomiting) or fainting.

Serious but rare complications reported with the procedure include a burn injury, perforation (hole in the womb), infection, difficulty opening your bowels or urinating, air embolism, complications leading to serious injury or death.

Is it safe to become pregnant after the procedure?

It is NOT safe to become pregnant after an endometrial ablation, it causes severe complications to you and your baby. You must use always use a reliable form of contraception. You may opt to be sterilised; this should be discussed with your doctor. As sterilisation requires a general anaesthesia, it cannot be undertaken in the outpatient setting and would require a future appointment to be made at a later date.

If you have any questions about your procedure or appointment, please contact us:

Appointment enquiries (Monday-Friday, 09.00 - 17.00) Tel: 0161 276 6314

For any emergency advice following symptoms post procedure, please contact:

Emergency Gynaecology Unit (at Wythenshawe Hospital, Open 24hours 7 days a week) Tel: 0161 291 2561

