

ENDOMETRIAL ABLATION : The Gynecare ThermaChoice Uterine Balloon Therapy System

BASIC INFORMATION : DEFINITION

Endometrial ablation is a procedure that removes or destroys the endometrium (lining of the uterus) and can minimize or even stop this bleeding. The Gynecare ThermaChoice Uterine Balloon Therapy System is one of the most popular method of endometrial ablation.

REASONS FOR PROCEDURE : To treat abnormal or heavy menstrual bleeding. It is a good alternative to hysterectomy for many women with heavy menstrual bleeding who :

- Do not respond to medications or developed side effects from it.
- Completed childbearing and wish to retain their womb or avoid major surgery.
- Do not have other uterine pathologies such as large fibroids, polyps and cancer.
- Have not reached menopause.

DESCRIPTION OF PROCEDURE

Women undergoing this procedure should have had a recent Pap smear, a diagnostic hysteroscopy and endometrial biopsy. All these tests should be normal prior to endometrial ablation. It is a minimally invasive surgery and done as a daycare procedure. The patient can return home on the same day.

The ThermaChoice Uterine Balloon Therapy System, consists of a balloon that is inserted through the neck of the womb (cervix) and into the uterus. Through a catheter connected to a controller console, the balloon is inflated with fluid and heated to 188°F (87°C) for eight minutes to destroy the uterine lining. The whole procedure is done under general anaesthesia and takes no more than 30 minutes to complete.

EXPECTED OUTCOME: After a successful treatment, most women will have little or no menstrual bleeding. Up to 98% of women are satisfied and up to 86% has significant reduction of menstrual flow. 3 out of 4 women treated had reduction of menstrual pain and cramping. There is no surgical scar, therefore recovery is quick and often with no or only mild pain. Most women return to normal activities in a day or two.

NOT SUITABLE IF: Women who have a malignancy or premalignant condition of the uterus, or women who have evidence of large uterine fibroids or hyperplasia (overgrowth of the lining) are usually not candidates for ablation.

POSSIBLE COMPLICATIONS: Complications of ablation are rare, but may include blood loss requiring a transfusion; perforation of the uterus, or unintended damage to other nearby internal organs. However, it is reassuring to note that Thermachoice has the lowest complication rate of any treatment of its type, especially when compared to removal of the womb (hysterectomy). The endometrium has regenerative (repair or replacement of cells) properties, and in some women, heavy bleeding may recurs years later. This method is not advised for women who want to have children. If pregnancy occurs following ablation, the uterus lining may not be adequate for a fetus to attach and

grow within the uterus. Pregnancy complications are much higher in these circumstances. Therefore, patients should still use contraception after the procedure.

POST-PROCEDURE CARE:

- Rest at home for 2-3 days; drink plenty of fluids; avoid alcohol for 48 hours. Follow medical instructions and the medications prescribed.
- No special diet or specific dietary restrictions is required.
- Common side effects after the procedure include nausea, vomiting, and a slight vaginal bleeding, which later become pinkish watery discharge for 2-4 weeks.
- Return to regular activities in 2-3 days. To minimize excessive bleeding, avoid strenuous activities or exercise for two weeks. Avoid sexual intercourse for 4 weeks
- Consult a doctor if you has following symptoms : persistent fever or lower abdominal pain, feeling unwell,
- excessive vaginal bleeding (soaked pads or presence of clots).
- Regular Pap tests and pelvic exams are still needed after an ablation procedure because the reproductive organs are still in place.

For more information or to make an appointment, please contact Sime Darby Specialist Centre, Taman Megah at 03 78031212

Dr Lee Say Fatt
Sime Darby Medical Centre, Subang Jaya
Revised July 2011