

What is a womb removal for heavy periods?

Heavy periods are when a patient loses an excessive amount of blood during consecutive periods. A heavy period can occur by itself or in combination with other symptoms, such as severe period pains. Heavy bleeding does not necessarily mean there is anything seriously wrong, but it can affect the patient physically, emotionally and socially, and can cause disruption to everyday life.

Surgery for removal of the womb (hysterectomy) is one of the most frequently performed types of surgery but should not be used as a first-line treatment solely for heavy menstrual bleeding. It can be performed through the vagina (vaginally) as well as through the stomach (abdominally). Common indications for surgery include:

- heavy bleeding
- non-cancerous growths (fibroids)
- a condition where cells like the ones in the womb (uterus) are found elsewhere in the body (known as endometriosis)
- weakness at the top of the vagina which causes the uterus (womb) to bulge downward (known as uterine prolapse)
- cancer of womb (uterus) and the lower end of the womb connecting to the upper vagina (cervix).

Patient eligibility criteria:

The patient's local NHS commissioning organisation will **ONLY** fund this treatment if the patient meets the following eligibility criteria below. Hysterectomy should be considered only when:

- other treatment options have failed, or are declined by the patient
- there is a wish for periods (menstration) to stop (amenorrhoea)
- the patient (who has been fully informed) requests it
- the patient no longer wishes to retain their womb (uterus) and fertility.

Patients offered a hysterectomy should have a full discussion of the implication of the surgery before a decision is made. The discussion should include:

- alternative surgery and psychological impact
- sexual feelings
- fertility impact
- the woman's expectations

Patient eligibility criteria continued...

- bladder function
- size and shape of the vagina
- presence and size of fibroids
- need for further treatment.

Individual assessment is essential when deciding the route of removing the womb (hysterectomy). The following factors need to be taken into account:

- presence of other conditions or diseases
- mobility and descent of the womb (uterus)
- history of previous surgery
- patients offered hysterectomy should be aware of increased risk of serious complications associated with hysterectomy when non-cancerous growths (uterine fibroids) are present
- patients should be informed about the risk of possible loss of ovarian function and its consequences, even if their ovaries are retained during hysterectomy.

The clinician in charge of the care of the patient's specific condition, usually a hospital doctor, can assist the application, if there is exceptional clinical need for the treatment to be funded. The patient's clinician must evidence clinical exceptionality and must be supported by the patient's local NHS commissioning organisation. See separate leaflet for more information on Individual Funding Requests (IFRs).

Advice and further guidance:



For more information search for 'heavy periods' at www.nhs.uk

Or to read the 'heavy menstrual bleeding (menorrhagia) decision aid' visit sdm.rightcare.nhs.uk

Treatment policy for patients covered by NHS Solihull, Birmingham CrossCity and Birmingham South Central Clinical Commissioning Groups.