Novasure – Radio frequency Endometrial Ablation Treatment for Heavy Periods

What is the treatment used for?

The Novasure treatment is one of the treatments for heavy periods. Heavy periods can cause problems such as fatigue, anaemia, social embarrassment and restricted activity. Heavy periods are quite common and about 1 in 5 women experience unusually heavy menstrual bleeding.

Alternative treatments

It is usual to try drug therapy first to see if this is effective. Drugs used include Tranexamic Acid, Mefanamic Acid, the oral contraceptive pill, the pill injection (Depo Provera) and the Levonorgestral intra uterine system (Mirena coil).
If these drug treatments have been unsuccessful, and you have completed your family, then it is possible to consider one of the techniques to surgically remove (ablate) the womb lining. There are several different techniques with similar success rates.
For those women who don’t respond to the ablation techniques, (or for whom they are not suitable), the only treatment remaining is a hysterectomy (surgical removal of the womb) which is a major surgical procedure.

What is involved with a Novasure endometrial ablation?

You will receive a general anaesthetic for the procedure. Once you are asleep, your surgeon will use an instrument to dilate (open up) the neck of your womb and insert a wand-like device into the womb cavity. This wand then expands to become a triangular mesh device. The surgeon can then apply a precisely measured quantity of radiofrequency electrical energy to the mesh which removes the lining of your womb. The mesh is then pulled back into the wand and the whole device is removed. You should be able to go home about 2 hours after the procedure.

What is the satisfaction rate with the procedure?

The procedure aims to either stop or reduce menstrual flow. Between 65% and 70% of women will stop having any menstrual bleeding (based on follow-up at 3 years) and a further 29% will have significantly reduced bleeding¹. Results from a patient satisfaction survey show that over 92% of patients were satisfied or very satisfied with the procedure 12 months after treatment². As well as reducing or stopping the menstrual bleeding the procedure may also reduce pain during periods.
**Are there any risks with the procedure?**

There is a small risk (less than 1 in 100) of the instruments perforating through the wall of the womb. This may necessitate an operation to look into your tummy with a camera (laparoscopy) to assess if there has been any damage to the bowel inside your tummy cavity. There is also a small risk (less than 1 in 100) of an infection. You should contact your GP if you have a fever following the procedure. You should also contact your GP if you have symptoms of pelvic pain which is not relieved by simple pain relief medication or if you feel generally unwell.

**What can I expect after the procedure?**

You may experience some period-like cramping and discomfort shortly after the procedure which can usually be treated with simple pain relief medication. You may experience nausea and vomiting as a result of the anaesthetic. Watery and/or bloody discharge after the ablation procedure is common for several weeks afterwards. Most women can return to normal activities within a day or two of their treatment. Sexual activity can be resumed after 7-10 days.

**Follow up**

You may or may not require a hospital follow up visit and this will be discussed with you prior to your discharge after your surgery. If you develop problems or require advice following discharge you should initially contact your GP.

**Can I still become pregnant after endometrial ablation?**

It is important to know that although the chances of pregnancy are reduced following an endometrial ablation procedure, it is still possible to become pregnant. You should continue to use some form of birth control if you decide to have endometrial ablation and this can be discussed further with your doctor. Pregnancy following endometrial ablation is very dangerous for both the mother and the foetus. You should not have this procedure if you think you may want to have a baby in the future.

**Further information**

If you have any further questions, these can be discussed with a member of the gynaecology team. Phone numbers for the consultant secretaries (available 9am – 5pm) are as follows:

- Mr Walker 0191 445 2121
- Mr Beeby 0191 445 2202
- Mr Das 0191 445 2187
- Mr Aird 0191 445 3246
- Mr Evbuomwan 0191 445 3247
- Dr Brandon 0191 445 3247

There is a manufacturer’s website at [www.novasure.com](http://www.novasure.com)


**Data Protection**

Any personal information is kept confidential. There may be occasions where your information needs to be shared with other care professionals to ensure you receive the best care possible.

In order to assist us improve the services available your information may be used for clinical audit, research, teaching and anonymised for National NHS Reviews. Further information is available in the leaflet Disclosure of Confidential Information IL137, via Gateshead Health NHS Foundation Trust website or the PALS Service.

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