HAVING AN ENDOMETRIAL RESECTION
A GUIDE TO THE PROCEDURE

What is an endometrial resection?

This technique is used to treat women with heavy periods and may also occasionally be helpful in reducing the accompanying pain. Essentially, with the help of a general anaesthetic, a fine telescope is passed through the cervix (neck of the womb) to inspect the inside of the womb. A very fine loop is attached to the telescope and with the aid of an electrical current the loop can be used to take off the lining of the womb throughout the cavity. This procedure ensures that the lining of the womb does not grow back, and in this way can be used to treat heavy periods. It has now been used successfully for more than 10 years. Mr Hackett will carefully discuss with you the chances of success from the operation and also any special problems which you might experience.

What should I expect?

Mr Hackett will arrange for you to have an injection four to six weeks before your admission date. This injection, carried out either by your GP or Mr Hackett, has the effect of thinning out the lining of the womb, making the treatment more likely to succeed. The injection can have the side effects of hot flushes, headache, sickness and nausea but these only occasionally occur and are usually quite mild.

On the day of operation you will be admitted to either the Lea or The Evelyn Hospital where you will be seen by Mr Hackett and the Anaesthetist. If you have any questions or special concerns, please feel free to ask.

The operation takes approximately 30 minutes. Patients will usually go home the same day but we sometimes ask you to remain on the ward overnight either to recover from the anaesthetic or to confirm that there is no bleeding from the surface of the womb.

After the operation

It is unusual to suffer more than slight lower abdominal 'cramp like' pain after the operation which usually settles down over 24 to 48 hours with the help of simple pain killers.

You will be given a further hormone injection, one normally used for contraception, which improves the chances of the operation being successful in the longer term.

You will be seen by Mr Hackett who can answer any further questions you may have and at that time will discharge you home. An appointment for you to return to see Mr Hackett for a later check up will be made.

After the operation you will experience a brown vaginal discharge and perhaps slight bleeding which will last for up to 2 to 3 weeks, but will gradually settle during that time. If you notice an
increase in bleeding, particularly the appearance of fresh blood, or if pain persists or if you are unwell in any way, please contact the ward or Mr Hackett directly (see contact numbers below).

You can expect there to be very little bleeding during the first three months, but thereafter it is possible that periods may return during the first year. It is not until one year later that the long term benefits of the operation can be judged. Approximately 45 per cent of women notice an improvement in their periods and a further 40 per cent or so find they no longer have periods at all. However, 15 per cent of cases see little or no benefit. At that time, if you wish, all treatment options, both medical and surgical, are still open to you.

Contact numbers:

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<thead>
<tr>
<th>The Nuffield Hospital</th>
<th>01223 303336 (ask for Ward Sister)</th>
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<tr>
<td>The BUPA Cambridge Lea Hospital</td>
<td>01223 237474 (ask for Ward Sister)</td>
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<tr>
<td>Mr Hackett's Appointments and Secretary (Sam Elliott)</td>
<td>01223 517676 (+ voice mail out of regular office hours)</td>
</tr>
<tr>
<td>Mr Hackett's office Fax</td>
<td>01223 509870</td>
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