



YOUR DOCTOR
WILL SEE YOU NOW

**ABNORMAL
UTERINE BLEEDING**

Abnormal uterine bleeding is the most common reason that a woman will see an OB/GYN. A normal menstrual cycle is between 24 days and 38 days, and a menses may last up to 8 days. Abnormal uterine bleeding is considered with too heavy of bleeding more than a tampon or pad an hour, bleeding in between cycles, bleeding that lasts more than 8 days, bleeding after sex, not having a menses for 6 months, or bleeding after menopause. A girl first starts having menses around 9-14 years, and the average age of menopause when menses stops is around age 52.

CAUSES

Some causes of abnormal uterine bleeding include fibroids, polyps, adenomyosis, problems with ovulation like PCOS or hypothyroidism, medications like blood thinners or aspirin, miscarriage, bleeding disorders, endometrial intraepithelial neoplasia, and uterine cancer.

DIAGNOSIS

A thorough history and physical exam are used in initial diagnosis. Blood tests like a blood count for anemia or infection, hormonal levels, and tests to rule out bleeding disorders may be ordered. Other tests that may be needed include an ultrasound, hysteroscopy, endometrial biopsy, or an MRI.

TREATMENT

Treatment is based on the cause of the abnormal bleeding. If serious conditions like cancer or precancerous cells have been ruled out, then treatment is based on symptoms. Treatment can be with medications or surgery.

Medications that may be used for treatment include hormonal birth control methods that can lighten flow, make menses more regular, or stop bleeding completely. Other medications include an antibiotic if you have an infection, gonadotropin-releasing hormone agonists to stop menstrual flow and reduce the

size of fibroids, or nonsteroidal anti-inflammatory drugs like ibuprofen to help control heavy bleeding. Surgery may be needed if medications do not work. Minor surgical options include hysteroscopy with polypectomy or submucosal myomectomy, or an endometrial ablation like the Novasure Ablation. Major surgical interventions include an abdominal myomectomy or a hysterectomy. A hysterectomy can be done in different ways: through the vagina, with laparoscopy, or through the abdomen. The most minimally invasive surgery that can be accomplished with medical history is preferred.

For more information or to schedule an appointment, call 605-718-3747 or visit RapidCityObGyn.com.



Hours:
Monday - Friday | 8AM - 5PM

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