

HEAVY MENSTRUAL BLEEDING

Understanding and management

During the transition to menopause, known as perimenopause, women frequently experience changes in their menstrual cycle. There are various reasons for this. Heavy menstrual bleeding (also known as HMB or previously menorrhagia) is a common problem that women have during this time, which can be both bothersome and distressing.

THE FOLLOWING FACTORS MAY CONTRIBUTE TO HEAVY MENSTRUAL BLEEDING:

Irregular ovulation: The release of an egg (ovulation) usually keeps periods regular and predictable. If no egg is released, which can happen in conditions like polycystic ovary syndrome (PCOS) as well as during perimenopause, the changing hormone levels can result in heavy and irregular periods, as well as unexpected spotting.

Polyps, which are small growths on the uterine lining, can cause heavy monthly bleeding as well as spotting between periods.

Uterine fibroids are non-cancerous growths in the muscle of the uterus (womb). They are common, however, depending on their size and position they can cause monthly bleeding that is excessive or prolonged.

Adenomyosis is when tissue similar to the lining of the uterus (the endometrium) grows within the muscle of the uterus, which can result in pain and heavy bleeding.

Endometrial hyperplasia is when the lining of the uterus starts to grow in an uncontrolled fashion. It is uncommon, though is seen more often in women with other risk factors such as obesity, diabetes, and PCOS. This can lead to heavy and irregular periods. Endometrial hyperplasia can turn into endometrial cancer (cancer of the womb) if untreated, so it's important to see your doctor if symptoms are severe, worsening or persistent.

SYMPTOMS AND INDICATORS OF HEAVY MENSTRUAL BLEEDING:

During the menstrual cycle, some periods last more than seven days.

- Regular replacement of sanitary items is required, for example, once every hour or two.
- Passing blood clots larger than a 20-cent piece.
- Symptoms of anaemia such weakness, shortness of breath, fatigue, and exhaustion.

- Difficulty carrying out usual activities due to bleeding.

MANAGING HEAVY MENSTRUAL BLEEDING:

Not all of these options will be suitable for every woman, so it's important to discuss your specific situation with your doctor.

- **Medications** such as ibuprofen, diclofenac, or naproxen, which are known as nonsteroidal anti-inflammatory drugs (NSAIDs), can alleviate pain and reduce menstrual bleeding.
- **Tranexamic acid** is a medication that helps to reduce blood loss during menstruation.
- **Hormonal treatments** are often very effective and include intrauterine devices (IUDs), oral contraceptives, or contraceptive implants.
- **Iron supplements** may be recommended if menstrual bleeding results in anaemia (low blood counts).
- **Endometrial ablation** is a surgical treatment that involves the removal of the lining of the uterus to reduce menstrual blood flow and can usually be performed as a day procedure.
- **Surgery** can be considered for women with polyps or certain types of fibroids, whilst in some cases closing off some of the blood vessels to the uterus (**uterine artery embolization**) may be an option.
- If other treatments have been unsuccessful, surgery to remove the uterus (**hysterectomy**) can be considered.

WHEN TO SEE A DOCTOR:

- When menstrual bleeding is much heavier or lasts for longer than usual.
- If bleeding leads to symptoms of anaemia or significantly interferes with daily activities. These include fatigue, weakness, pale skin, shortness of breath, dizziness, cold hands and feet, headache, chest pain, irregular heartbeat, brittle nails, and restless leg syndrome.
- When there is considerable pelvic discomfort or pain.
- Though common, heavy menstrual bleeding can be a sign of more serious conditions, including endometrial cancer. If your periods change significantly or are particularly heavy or irregular, it is best to see a doctor.
- If any bleeding happens after menopause, this may be an indication of a more serious condition, and you should see a doctor urgently.

If you are experiencing heavy menstrual bleeding, you should not suffer in silence and instead, consult with your GP or gynaecologist about the various treatment choices that are appropriate for you.