



**Quality
Standards**

PATIENT REFERENCE GUIDE

Heavy Menstrual Bleeding

Care for Adults and Adolescents
of Reproductive Age

**Health Quality
Ontario**

Let's make our health system healthier

Patients, families, and health care professionals partnered together on this guide to define what the best care should look like for people living with heavy menstrual bleeding. The information in this guide has been created to help patients, families, and caregivers know what to ask for when receiving treatment. It is based on the best available research and is designed to help ensure the highest-quality care possible.



If you or your loved one is being treated for heavy menstrual bleeding...

You can use this guide to help you and your health care professionals develop a care plan that works for you. You should use this information to become aware of what high-quality care looks like and to ask informed questions about your care. Care plans can be very different for each person, so it is important to work closely with your health care professionals.

Here are some things to consider if you or a loved one is being treated for heavy menstrual bleeding.

Understanding and Planning Your Care

Your Initial Health Care Visits and Tests

- At your initial assessment, your family doctor or nurse practitioner should ask you about your bleeding and how it affects your life, do a pelvic exam, and ask you to get blood and urine tests.
- If you have low iron or anemia (low red blood cell count), you should be advised to take iron pills. You may need iron in liquid form through a needle (intravenously).
- If you are an adolescent, you should be asked about your bleeding history and perhaps have extra blood tests.
- You may need an endometrial biopsy, a procedure to take a tissue sample from your uterus to look for abnormal cells or an overgrowth of the lining.
- You may need an ultrasound of your uterus to look at its size or shape. An ultrasound uses sound waves to take pictures.

Choosing Your Treatment

- You should decide what treatment you prefer after discussing all the options with your health care professional. You should be told about any side effects, risks, effects on your ability to get pregnant, and out-of-pocket costs.
- Your health care professional should discuss with you options for hormonal and non-hormonal medication.
- Before referring you to a gynecologist, your family doctor or nurse practitioner should do a full assessment and offer you a prescription to relieve your symptoms. If referred, you should receive an appointment within 3 months.
- If you never want to get pregnant, your gynecologist may offer an endometrial ablation, which removes the lining of the uterus. This procedure makes pregnancy unsafe for you, so you will need to use contraception for the rest of your childbearing years.
- If fibroids (non-cancerous growths) are causing your heavy menstrual bleeding, you should be offered a uterine artery embolization, myomectomy, or hysterectomy. Uterine artery embolization shrinks the fibroids by blocking their blood supply. Myomectomy is surgery to remove the fibroids. Hysterectomy is surgery to remove your uterus.
- If you are considering a hysterectomy, you should be offered the choice of other treatments, including medications and less invasive procedures.
- If you choose a hysterectomy, you should be offered the type of surgery that is safest for you.
- If you have anemia, you should be advised to take iron pills or receive iron intravenously before a procedure.

If You Have Sudden Uncontrolled Bleeding

- If your bleeding is suddenly extremely heavy, your health care professional will try to stop it with medication or a procedure. You may also be given iron intravenously or a blood transfusion. You should have a follow-up appointment near your next period.
- You should only receive dilation and curettage (D&C) if you have very severe bleeding and if medications did not slow it. D&C removes abnormal tissue from the lining of your uterus. If you have a D&C, hysteroscopy (a procedure to look at the inside of your uterus) should be done at the same time.

Everybody is different, and some statements may not apply in your situation. If you have questions about your care, **it is important to speak with your health care professional.**

A more detailed version of this quality standard is available for health care professionals so they can stay current on the newest best evidence for treating people living with heavy menstrual bleeding. This detailed version is also available to members of the public and can be found on our website.

Looking for more information?

Please see the complete quality standard at hqontario.ca and contact us at qualitystandards@hqontario.ca if you have any questions or feedback about this guide.

About Health Quality Ontario

Health Quality Ontario is the provincial advisor on the quality of health care. We are motivated by a single-minded purpose: **Better health for all Ontarians.**

Our quality standards are concise sets of statements outlining the best possible care for patients based on the best available evidence. They are developed in collaboration with clinical experts from across the province and patients and caregivers with lived experience with the condition being discussed.

For more information about Health Quality Ontario and our quality standards, visit: hqontario.ca.