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TITLE

ABLATION OF UTERINE POLYPS IN TREATMENT OF ABNORMAL UTERINE BLEEDING

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ABSTRACT

INTRODUCTION: Dysfunctional uterine bleedings (DUB) are all bleedings other than menstruation, and can occur due to disease of the uterus, pelvic organs often without any demonstrable pathological change. The causes may be different: endometritis, endometrial polyp, myoma, adenomyosis, hyperplasia and endometrial cancer. They cause increased menstruation bleeding and "spotting" between periods and after intercourse, diagnosed by the ultrasound, confirmed by hydrosanography and treated by hysteroscopy and by removing it entirely.

OBJECTIVE: Monitoring incidence DUB after removal of polyps.

MATERIALS AND METHODS: During the 6 months we diagnosed 56 outpatients. All had hysteroscopy and ablation of polyps. We monitored the occurrence of new bleedings for six months after the procedure.

RESULTS: The histopathological diagnosis confirmed polyps in 50 patients (89%) between the ages of 19-56 and in 6 (54%) aged 65 and over. In the 6 (11%) patients in 4 (7.3%) were no materials for the analysis, and 2 (3.6%) were treated by fractional curettage. In those over 65 years at the 3 (46%) had no material too.

After 6 months in all 65 years there was no new abnormal bleeding. Respondents without a PHD verification of endometrial polyps still had irregular bleeding, spotting and pain. In women older than 65 bleeding again happened in all three patients (100%) so they were curettaged. One patient (33%) had endometrial suspected carcinoma and was operated, and two (77%) had an endometrial polyp, which was removed entirely. Three respondents with confirmed polyp had no new bleeding after ablation of polyps.

CONCLUSION: Endometrial ablation of polyps is an important procedure to reduce irregular uterine bleeding in all age groups.

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