



Heavy Bleeding

Heavy bleeding is clinically defined as blood loss of more than 80ml during menstruation. You may observe it as more blood loss than normal, requiring more frequent changes of pads or tampons, experiencing blood clots, or episodes of flooding or leakage.

Causes

Causes of abnormally heavy bleeding are:

- Hormonal abnormalities
- Infection of the vagina or uterus
- Problems with blood clotting
- Pathology of the uterus or vagina such as cancer or pre-cancer
- Trauma to the vagina
- Polyps or fibroids in the uterus
- Contraceptive pills or intrauterine device (IUD)

Investigations

Blood Tests may be performed to ascertain the degree of bleeding in causing anaemia or iron deficiency, or test for hormone levels.

Imaging such as ultrasounds may find pathologies in the uterine cavity or cervical canal

Cervical Screening Tests "CST" (previously PAP smear) are important to rule out cervical pathology

Operative procedure such as hysteroscopy where a thin long camera is inserted through the cervix into the uterine cavity to visualise any pathology. A biopsy (curettage) can be done at the same time to be sent for histopathology to look for pathology at the cellular level, to rule out cancer or pre-cancer.

Treatment

The type of treatment for abnormally heavy vaginal bleeding depends on the cause.

If a uterine structural pathology is found, such as polyp or fibroid, usually surgical treatment is all that is required.

Other treatments include hormonal or non-hormonal medications. Hormonal treatment comes in many forms including oral tablets, injections, intravaginal ring, or intrauterine device. Non-hormonal medications are usually oral tablets.

Another surgical option is endometrial ablation where the lining of the uterus is removed to stop it from bleeding during periods.