

Patient Information

## Gynaecology

# **Postmenopausal bleeding**

Postmenopausal bleeding is any bleeding from the vagina after menopause.

## What causes postmenopausal bleeding

There are lots of causes for postmenopausal bleeding. These include:

- menopause-related thinning of the vaginal lining
- polyps (non-cancerous growths from the lining of the womb or cervix).
- a thickened womb lining hormone replacement therapy (HRT) can cause this

Postmenopausal bleeding is not usually serious, but it can be a sign of the cervix, vagina, or womb cancer. 1 in 10 women with postmenopausal bleeding may have pre-cancerous or cancerous cells in their womb lining.

You may feel worried, but 9 out of 10 women referred with postmenopausal bleeding **do not** have cancer. But this can only be ruled out with further investigations.

You have been referred to the hospital for further tests. This is through an urgent cancer referral.

## What investigations you might have

#### Internal ultrasound scan

You are usually offered an internal ultrasound scan. This is done by placing a small finger-like probe into your vagina.

When you get this appointment, please let us know on the telephone number on your text message or your invitation letter if:

- you cannot tolerate internal examinations
- you have problems with mobility
- you have problems lying still

We will measure your height and weight when you come for your scan.

After the scan, you may receive a telephone appointment, a face-to-face appointment, or a letter without an appointment. This will explain the scan result and if you need any more investigations.

If no more investigations are needed, we will discharge you from the cancer pathway.

#### Biopsy

A biopsy is a procedure which involves taking a small sample of body tissue. We will recommend that you have a biopsy if the ultrasound scan suggests the lining of your womb is thicker than it should be.

#### Polyp removal

If you have a polyp, we will recommend that you have a biopsy of the lining of the womb and removal of the polyp.

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#### Hysteroscopy

We may offer you a procedure called hysteroscopy. A hysteroscopy is a procedure used to examine the inside of the womb.

During a hysteroscopy, a thin telescope with a camera and light at the end is passed into your vagina and cervix. Images are sent to a monitor, and this allows the specialist to see inside your womb.

In more than 9 in 10 cases, hysteroscopy is successfully done in the outpatient clinic.

Hysteroscopy can be painful. Please take painkillers such as paracetamol or ibuprofen 30 minutes before your appointment.

If you take tablets to thin your blood (anticoagulants), please call the clinic before your appointment. You may need to stop taking this medicine.

If you cannot tolerate a hysteroscopy in an outpatient clinic or there are any problems, you will be offered the procedure under general anaesthetic.

During your hysteroscopy, we will take some biopsies from the lining of your womb. We may also remove any polyps.

Sometimes you may have a biopsy of the lining of the womb (a pipelle) without having a hysteroscopy.

#### Internal examination

If seen face-to-face at your first hospital appointment, you may be offered an internal examination of your pelvis and vagina.

### More information

For more information, visit <u>www.nhs.uk/conditions/post-menopausal-bleeding</u>.

The Trust has access to interpreting and translation services. If you need this information in another language or format, please contact 024 7696 7400 and we will do our best to meet your needs.

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