



P59. HEAVY MENSTRUAL BLEEDING DOESN'T MEAN ENDLESS HOSPITAL APPOINTMENTS.

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Context:

Management of heavy menstrual bleeding (HMB) in a gynaecology unit.

Objective:

Assess how women referred with HMB from primary care are managed and thus assess how their treatment pathways might be streamlined.

Methods:

Analysis of demographics and treatment of women in a single gynaecology unit, with attention to those referred with HMB.

Main Outcome Measures:

Ultrasound findings and treatment plans of women attending with HMB.

Results:

3000 women attended the gynaecology department over two months. 141 were referred with HMB. On ultrasound almost 50% had fibroids. Treatments ranged from conservative through to operative management.

Interestingly almost two thirds of women were managed in outpatients and thus did not require anaesthetic or admission for treatment. They were treated medically or an intra uterine system was inserted to treat symptoms of HMB.

Just 5% of women failed their initial treatment, either medical or surgical and subsequently underwent hysterectomy.

Conclusions:

Our analysis demonstrates that a large number of women attending a hospital based gynaecology department can receive treatment in a single visit and not necessarily in a hospital environment.

This suggests that women with HMB could be seen in community based one-stop clinics and hospital

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attendances reserved for the small number of women who required operative treatment. This would benefit the patients, whilst improving the efficiency of hospital gynaecology departments.