

Surgery Overview

Endometrial ablation is a procedure that destroys (ablates) the uterine lining, or endometrium. This procedure is used to treat abnormal uterine bleeding. Sometimes a lighted viewing instrument (hysteroscope) is used to see inside the uterus.

The endometrium heals by scarring, which usually reduces or prevents uterine bleeding.

How do you prepare for the procedure?

Procedures can be stressful. This information will help you understand what you can expect. And it will help you safely prepare for your procedure.



Preparing for the procedure

- Be sure you have someone to take you home. Anesthesia and pain medicine will make it unsafe for you to drive or get home on your own.
- Understand exactly what procedure is planned, along with the risks, benefits, and other options.
- If you take aspirin or some other blood thinner, ask your doctor if you should stop taking it before your procedure. Make sure that you understand exactly what your doctor wants you to do. These medicines increase the risk of bleeding.
- Tell your doctor ALL the medicines and natural health products you take. Some may increase the risk of problems during your procedure. Your doctor will tell you if you should stop taking any of them before the procedure and how soon to do it.
- Make sure your doctor and the hospital have a copy of your goals of care plan. It lets others know your health care wishes. It's a good thing to have before any type of surgery or procedure.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

- **Plan Ahead**
- **Plan a ride home.** Ask a family member or friend to bring you home after your hospital visit and stay with you for 24 hours

- **Plan for meals.** Good nutrition is important for your recovery, but cooking may be harder to do right after you get home. Prepare and freeze meals before your surgery or ask friends and family to help you cook or shop for groceries.
- **Get help with chores.** After you get home you may need help. For a short time after your surgery, you may be told to avoid certain physical activities. Plan ahead and arrange to have some help with chores after your surgery.
- **Buy gum or hard candies.** Chewing gum and sucking on hard candies may help get your bowels moving after surgery.

Be as healthy as possible

- **Be active.** Being active before surgery will make it easier for you to be active after surgery. If you're normally active, keep doing your regular activities up to the day of your surgery. If you aren't used to exercising, start slowly. You can start by going for 15 minute walks.
- **Eat healthy.** Eating healthy foods will give your body the nutrients it needs to prepare for and handle the surgery. Eat healthy foods and drink enough fluids in the weeks before your surgery. Your healthcare team will tell you how long before surgery that you need to stop eating and drinking.
- **Manage your medical conditions.** If you have other medical conditions, such as anemia or high or low blood sugar, ask your healthcare team what you need to do to prepare for surgery.
- **Quit tobacco.** You can heal faster and prevent lung problems after surgery if you quit tobacco. Aim to quit smoking and using tobacco and tobacco-like products at least 4 weeks before surgery. Talk to your healthcare team about ways to quit or cut back. **Don't drink alcohol 24 hours before surgery.** Alcohol, cannabis, and other drugs may interact with medicines you take before and after surgery. Talk to your healthcare team if you need help stopping or cutting back on alcohol, cannabis, or other drugs.

Do the following before your surgery to help you feel better sooner and recover faster.

The day before surgery

- Know the time of your surgery, when you need to be at the hospital, and where you need to go when you get there.
- Follow any instructions the healthcare team or your surgeon gave you for your medicines (including herbal or complementary medicines).
- Don't drink alcohol 24 hours before your surgery.



- **Stop** eating at midnight. This is very important!



Stop eating and drinking all non-clear fluids at midnight. This is very important

- You may DRINK CLEAR FLUIDS ONLY up to 3 hours before surgery. This includes BLACK coffee, tea, Gatorade, apple juice and water.

Morning of surgery

Plan to arrive at the hospital on time.

- Follow any instructions provided
- Bring all of the things you packed for your hospital stay **if** you are being admitted.
- Follow **all** other instructions the healthcare team gave you to prepare for surgery.
- Bring your CPAP if you use one

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What happens on the day of the procedure?

If your doctor told you to take your medicines on the day of the procedure, take them with only a sip of water.

- Take a bath or shower before you come in for your procedure. Do not apply lotions, perfumes, deodorants, or nail polish.
- Take off all jewelry and piercings. And take out contact lenses, if you wear them.

At the hospital



Bring a picture ID Health Card

- You may be given medicine for pain.
- You may be given an Rh immune globulin shot if you have Rh-negative blood.



When should you call your doctor?

- You have questions or concerns.
- You don't understand how to prepare for your procedure.
- You become ill before the procedure (such as fever, flu, or a cold)

What to Expect After Surgery

After the procedure, you may have some side effects, such as cramping, nausea, and vaginal discharge that may be watery and mixed with blood. This discharge will become clear after a couple of days and can last for around 1 to 2 weeks.

Why It Is Done

Endometrial ablation is used to control heavy, prolonged vaginal bleeding when:

- Bleeding has not responded to other treatments.
- Child-bearing is completed.
- You prefer not to have a hysterectomy to control bleeding.

Endometrial Ablation: What to Expect at Home

Your Recovery

Endometrial ablation is a procedure to treat very heavy menstrual bleeding or other abnormal bleeding in the uterus. During ablation, the lining of the uterus is destroyed. The lining heals by scarring. The scarring reduces or prevents bleeding. Your doctor inserted a device into your uterus to destroy the lining.

You may have cramps and vaginal bleeding for several days. You may also have watery vaginal discharge mixed with blood for a few days.

This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to feel better as quickly as possible.

Discharge

How you may feel after your operation

- You may feel nauseated, light headed dizzy or sleepy for up to 24 hours after your surgery
- You may have a slight temperature for 2 days
- You may feel tired for a few days after your surgery

For 24 hours after your surgery do not....

- Drive a vehicle
- Operate heavy equipment
- Drink alcohol or smoke
- Make any important or legal decisions

How can you care for yourself at home?



Activity

- Rest when you feel tired. Getting enough sleep will help you recover.
- Most women are able to return to work on the day after the procedure.
- You may shower and take baths as usual.
- Ask your doctor when it is okay for you to have sex.



Diet

- Start with light foods such as soup, toast and tea. Avoid dairy and fatty foods
- You may notice that your bowel movements are not regular right after the procedure. This is common. Try to avoid constipation and straining with bowel movements. You may want to take a fibre supplement every day. If you have not had a bowel movement after a couple of days, ask your doctor about taking a mild laxative.



Medicines

- Your doctor will tell you if and when you can restart your medicines. He or she will also give you instructions about taking any new medicines.
- If you take aspirin or some other blood thinner, ask your doctor if and when to start taking it again. Make sure that you understand exactly what your doctor wants you to do.
- Take pain medicines exactly as directed.
 - If the doctor gave you a prescription medicine for pain, take it as prescribed.
 - If you are not taking a prescription pain medicine, ask your doctor if you can take an over-the-counter medicine.
- If your doctor prescribed antibiotics, take them as directed. Do not stop taking them just because you feel better. You need to take the full course of antibiotics.



Other instructions

- You may have some light vaginal bleeding. Wear sanitary pads if needed. Do not douche or use tampons until your doctor says it is okay.
- You may want to use a heating pad on your belly to help with pain. Use a low heat setting.

Drink oral nutritional supplements (like Ensure Protein Max) for the first month after surgery to give you extra protein and help you heal faster.

- Take less pain medicine as your pain gets better.
- Take your blood thinner and other medicines as you were told.

What is anesthesia?

Anesthesia controls pain. And it keeps all your organs working normally during surgery or another kind of procedure.

Anesthesia can relax you. It can also make you sleepy or forgetful. Or it may make you unconscious. It depends on what kind you get.

Your anesthesia provider (anesthesiologist) will make sure you are comfortable and safe during the procedure or surgery.

There are different types of anesthesia.

- **Local anesthesia.** This type numbs a small part of the body. Doctors use it for simple procedures.
 - You get a shot in the area the doctor will work on.
 - You will feel some pressure during the procedure.
 - You may stay awake. Or you may get medicine to help you relax or sleep.
- **General anesthesia.** This type affects the brain and the whole body. You may get it through a small tube placed in a vein (IV). You are unconscious and will not feel pain. During the surgery, you will be comfortable. Later, you will not remember much about the surgery.

What type will you have?

- Nausea and vomiting. This does not usually last long. It can be treated with medicine.
- A slight drop in body temperature. You may feel cold and shiver when you first wake up.
- A sore throat, if you had general anesthesia.
- Muscle aches or weakness.
- Feeling tired.

You may go home the same day of surgery or you may stay in the hospital. Your doctor will check on your recovery from the anesthesia. He or she will answer any questions you may have.

For answers to frequently asked questions about your anesthetic, please visit <https://www.cas.ca/en/about-cas/advocacy/anesthesia-faq>



When should you call for help?

Call 911 anytime you think you may need emergency care. For example, call if:

- You passed out (lost consciousness).
- You have chest pain, are short of breath
- **Call your doctor** or seek immediate medical care if:
- You have vaginal discharge that has increased in amount or smells bad. You have signs of infection, such as:
 - Increased pain, swelling, warmth, or redness.
 - A fever.

You have bright red vaginal bleeding that soaks one or more pads in an hour