

RECOVERING WELL



Royal College of
Obstetricians &
Gynaecologists

Information for you after an

Endometrial Ablation



How to navigate

when viewing this information online

Contents

From the contents page you can quickly and easily access all the topics listed.

To view a topic, simply tap/click the title of the information you want to see.

Within individual pages

Simply tap/click on **contents**, found on the bottom right of all pages, to return to the contents page. You can then choose information on another topic.

Next to the contents button is a **previous view** option which will take you back to the previous page you looked at.

Occasionally information on a topic will cover more than one page. The **more** button will show you further information on the topic.

Where other online information is available which might be useful to you a web link is given. Provided you have internet access, simply tap/click the link to be taken to this information. These additional resources are **highlighted** throughout.

Swiping/click left or right will take you to the previous or next page within the publication.



Contents

- ▶ **Who is this information for?**
 - ▷ About this information
- ▶ **What can I expect after an endometrial ablation?**
 - ▷ Usual length of stay in hospital
 - ▷ After-effects of general anaesthesia
 - ▷ Vaginal bleeding and discharge
 - ▷ Pain and discomfort
 - ▷ Starting to eat and drink
 - ▷ Tiredness
- ▶ **What can help me recover?**
 - ▷ Eat a healthy balanced diet
 - ▷ Stop smoking
 - ▷ A positive outlook
- ▶ **What can slow down my recovery?**
- ▶ **When should I seek medical advice after an endometrial ablation?**
- ▶ **Getting back to normal**
 - ▷ Around the house
 - ▷ Driving
 - ▷ Having sex
- ▶ **Returning to work**

Who is this information for?

This information is for you if you are about to have, or you are recovering from, an endometrial ablation. This is a type of operation to thin or remove your endometrium (the lining of the uterus (womb)) in an effort to treat heavy periods. You might also find it useful to share this information with your family and friends.

The exact type of endometrial ablation you have depends on your personal circumstances and will be discussed with you by your gynaecologist before your operation.

Endometrial ablation is usually done as a day-case procedure. You may have it done in the outpatients department with a local anaesthetic or you may have it done under a general anaesthetic.

About this information

You should read this information together with any other information you have been given about your choices and the operation itself.

This information gives general advice based on women's experiences and expert opinion. Every woman has different needs and recovers in different ways.

Your own recovery will depend on:

- how fit and well you are before your operation
- the reason you are having an endometrial ablation
- the exact type of endometrial ablation that you have
- how smoothly the operation goes and whether there are any complications.

What can I expect after an endometrial ablation?

Usual length of stay in hospital

If you have the operation in outpatients, you should be able to go home soon afterwards but, even after a local anaesthetic, many women prefer not to drive themselves home. If you have had a general anaesthetic for this operation, you will usually need to stay in hospital for three to four hours afterwards to make sure that you are fully awake and comfortable before you go home.

After-effects of general anaesthesia

Most modern anaesthetics are short lasting. You should not have, or suffer from, any after-effects for more than a day after your operation. During the first 24 hours you may feel more sleepy than usual and your judgement may be impaired. If you drink any alcohol, it will affect you more than normal. You should have an adult with you during

this time and you should not drive or make any important decisions.

Vaginal bleeding and discharge

You can expect some vaginal bleeding for a few days after your operation. This is usually like a light period. The bleeding will gradually lessen and become like a heavy discharge, and may darken in colour. For some women this discharge can last for three to four weeks. You should use sanitary towels rather than tampons as using tampons could increase the risk of infection.

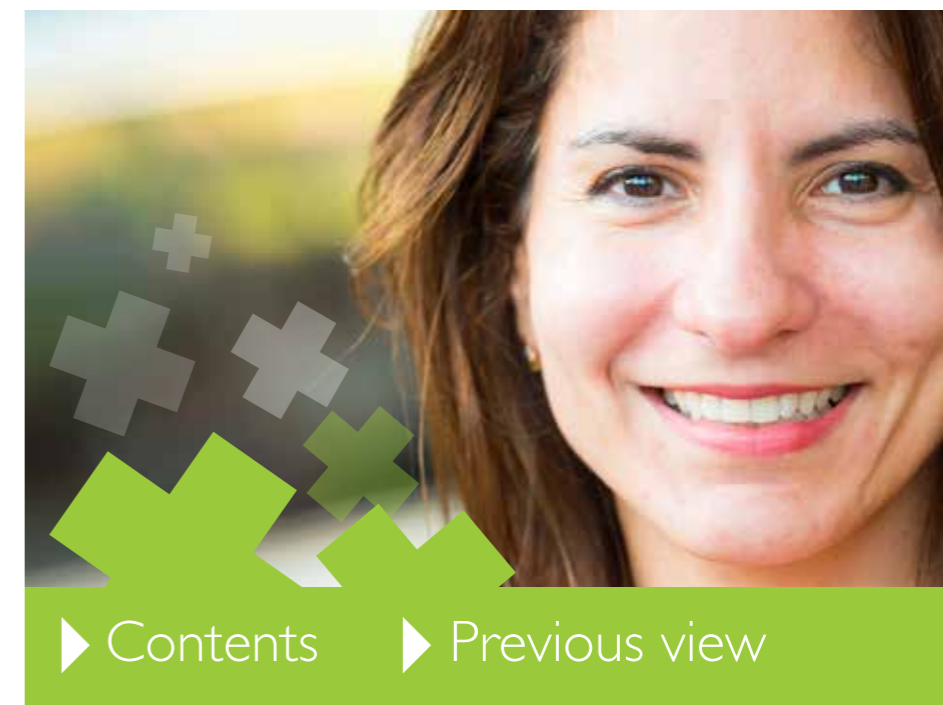
Pain and discomfort

You can expect some cramps (similar to period pains) in your abdomen for a day or so after your operation. When leaving hospital, you will usually be provided with painkillers to take for 48 hours after your operation.

Most women will not need to take painkillers after this time. It is a good idea to have some simple pain relief, such as paracetamol or ibuprofen, at home just in case.

Sometimes painkillers that contain codeine or dihydrocodeine can make you sleepy, slightly sick and constipated. If you do need to take these medications, try to eat extra fruit and fibre to reduce the chances of becoming constipated.

[More >](#)



▶ Contents

▶ Previous view

What can I expect after an endometrial ablation?

Starting to eat and drink

If you have had a short general anaesthetic, once you are awake, you will be offered a drink of water or cup of tea and something light to eat before you go home. If you have had a local anaesthetic, you will usually be able to eat and drink as normal following your operation.

Tiredness

You may feel much more tired than usual after your operation as your body is using a lot of energy to heal itself. A short nap may help you recover your energy. Your energy level should return to normal after a few days, especially if you no longer have heavy periods.



What can help me recover?

There are a number of positive steps you can take at this time that will help you recover.

Eat a healthy balanced diet

Ensure that your body has all the nutrients it needs by eating a healthy balanced diet. A healthy diet is a high-fibre diet (fruit, vegetables, wholegrain bread and cereal) with up to two litres per day of fluid intake, mainly water. Remember to eat at least five portions of fruit and vegetables each day!

Stop smoking

Stopping smoking will benefit your health in all sorts of ways, such as lessening the risk of chest problems after your anaesthetic. By not smoking - even if it is just while you are recovering - you will bring immediate benefits to your health. If you are unable to stop smoking before your operation, you may need to bring nicotine replacements for use during your hospital stay.

You will not be able to smoke in hospital. If you would like information about a smoking cessation clinic in your area, speak with the nurse in your GP surgery.

A positive outlook

Your attitude towards how you are recovering is an important factor in determining how your body heals and how you feel in yourself. You may want to use your recovery time as a chance to make some longer term positive lifestyle choices such as:

- starting to exercise regularly if you are not doing so already and gradually building up the levels of exercise that you take
- eating a healthy diet - if you are overweight, it is best to eat healthily without trying to lose weight for the first couple of weeks after the operation; after that, you may want to lose weight by combining a healthy diet with exercise.

What can slow down my recovery?

It can take longer to recover from an endometrial ablation if:

- you had health problems before your operation; for example, women with diabetes may heal more slowly and may be more prone to infection
- you smoke - smokers are at increased risk of getting a chest infection during their recovery, and smoking can delay the healing process
- you were overweight at the time your operation - if you are overweight, it can take longer to recover from the effects of anaesthetic and there is a higher risk of complications such as infection and thrombosis
- there were any complications during your operation.

Recovering after an operation is a very personal experience. If you are following all the advice that you have been given but do not think that you are at the stage you ought to be, talk with your GP.

When should I seek medical advice after an endometrial ablation?

While most women recover well after an endometrial ablation, complications can occur - as with any operation.

You should seek medical advice from your GP, the hospital where you had your operation, **NHS 111** or **NHS 24** if you experience:

- **Burning and stinging when you pass urine or pass urine frequently:** This may be due to a urine infection. Treatment is with a course of antibiotics.
- **Heavy or prolonged bleeding:** If you are also feeling unwell and have a temperature (fever), this may be due to an infection in your uterus (womb). Treatment is usually with a course of antibiotics. Occasionally, you may need to be admitted to hospital where the antibiotics can be administered as a drip.

- **Pain in your lower abdomen:** If you have pain across your lower abdomen, especially if you also have a temperature (fever), this may be a sign of a more serious complication associated with endometrial ablation. You will need to be admitted to hospital.



Getting back to normal

Around the house

You may feel slightly tired for the first few days after your operation, so it is a good idea to plan to have some support with normal activities such as shopping and childcare. Most women are able to continue to do everyday domestic activities within days.

Driving

You should not drive for 24 hours after a general anaesthetic, nor until you are free from the sedative effects of any pain relief.

Having sex

It is advisable to wait until your vaginal bleeding or discharge has stopped, and you feel ready.



Returning to work

Exercise and activity including lifting and standing the day after your procedure will not cause any harm, and you should go for at least a couple of gentle walks for 15-20 minutes on the first day.

Most women will want to rest for a day or so before being very active, and it is advisable to avoid heavy work or substantial exercise for a couple of days until your body has recovered from the anaesthetic and the uterus starts to heal. Most women need between two and five days before they feel able to return to work, although this will depend on the type of job you do.

If your work is physically demanding, it is advisable to return gradually, doing less physical work or fewer hours for the first couple of days.

If you are off work for less than one week, you should be able to complete a self-certification form for the time you have been off work. If it is longer than one week, you will need to obtain a certificate from the hospital where you have your operation.

You might also wish to see your GP or your occupational health department before you go back and do certain jobs – discuss this with them before your operation. You should not feel pressurised by family, friends or your employer to return to work before you feel ready. You do not need your GP's permission to go back to work. The decision is yours.

Acknowledgements

This information was developed by a multidisciplinary working party on recovery following gynaecological surgery and was peer reviewed by experts in the field and by patients and the public.

A final note

The Royal College of Obstetricians and Gynaecologists produces patient information for the public. The ultimate judgement regarding a particular clinical procedure or treatment plan must be made by the doctor or other attendant in the light of the clinical data presented and the diagnostic and treatment options available.

Departure from the local prescriptive protocols or guidelines should be fully documented in the patient's case notes at the time the relevant decision is taken.

All RCOG guidelines are subject to review and both minor and major amendments on an ongoing basis. Please always visit www.rcog.org.uk for the most up-to-date version of this guideline.

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▶ Contents

▶ Previous view