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216032 or patient.information@addenbrookes.nhs.uk



We are currently working towards a smoke-free site. Smoking is only permitted in the designated smoking areas.

For advice and support in quitting, contact your GP or the free NHS Stop Smoking helpline on 0800 169 0 169

Women's Services

Patient Information

Microwave endometrial ablation

What is MEA?

Microwave Endometrial Ablation (MEA) is a treatment for heavy periods. It is a procedure which involves heating the lining of the womb with microwaves to destroy it to a depth of around three millimetres.

The microwaves are delivered by a probe which is gently inserted into the uterus. The probe is moved from side to side inside the uterus. It takes only a few minutes to do this procedure.

Document history

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Why has this operation been recommended for me?

Your doctor has recommended MEA because you are suffering from heavy periods. Heavy periods can be treated medically or surgically. Surgical treatment involves hysterectomy or Endometrial Ablation. MEA is one type of endometrial ablation.

Benefits

A hysterectomy is a major operation to remove the womb and can take up to three months for a full recovery. Endometrial Ablation destroys the lining of the womb and can be carried out as a day case. You will be able to resume normal activities within a few days.

Fibroids or polyps can be the cause of, or add to your heavy bleeding. In many cases MEA can be used where fibroids or polyps are present without the need to treat them separately.

After treatment your periods may become lighter or may stop altogether. This is an effective procedure in approximately 80% of women. You may still experience periods but more than half of women treated have no periods.

Risks

This procedure is performed under a general anaesthetic. For a woman who is otherwise in good health, the risk of a serious complication due to general anaesthesia is less than 1%.

Surgical risks and complications include bleeding, infection, damage (perforation) to the uterus, burning of vagina, cervix and/or part of bowel.

Before the procedure

Your doctor will probably recommend that you go to your GP a month before your operation to have a hormone injection to thin the lining of the womb so that the treatment can be effective.

If you are not sure if you need to have this done, please contact your Consultant's secretary via the Addenbrooke's switchboard on 01223 245151.

During the procedure

This procedure will be done under a general anaesthetic. A hysteroscopy (looking into the womb with a telescope) may be done before the ablation if this has not already been done. The procedure will take a few minutes.

After the procedure

Most women are well enough to go home on the same day. You will be given instructions as to what you can and cannot do following your general anaesthetic. You may experience some period like pains after the procedure. Discomfort can last for up to a week, you can take painkillers such as Paracetamol if you need to. Your doctor may also prescribe antibiotics.

You will probably experience bleeding or watery discharge from the vagina; this can last for up to two weeks. If you experience pain that does not go away with simple painkillers, or have either a smelly vaginal discharge or a high temperature you should contact your doctor.

Alternative procedures

Hysterectomy would be the next option if this procedure does not work.

If you have any questions or concerns following this procedure you can contact Daphne ward (08:00 until 20:00) on 01223 216363 or ward L4 on 01223 348500.