

Hampshire and Isle of Wight Integrated Care Board Priorities Committee

Policy title	Policy 39: Hysterectomy and Dilation and Curettage for Heavy Menstrual Bleeding
Policy position	Not Normally Funded
Date of issue	April 2023
Update	This policy will be updated in light of a substantial body of new evidence or new national guidance.

This policy only applies to heavy menstrual bleeding (HMB) without any underlying medical causes (such as endometriosis, fibroids and pelvic inflammatory disease).

This policy does not relate to the management of suspected malignancies or trauma, for which agreed local pathways should be followed.

Hysterectomy:

A hysterectomy is a surgical procedure to remove the womb (uterus).

Hysterectomy for HMB without any underlying medical causes is **not normally funded**.

Dilation and Curettage:

Dilation and curettage (D&C) is a minor surgical procedure where the opening of the womb (cervix) is widened (dilatation) and the lining of the womb is scraped out (curettage).

D&C is **not normally funded** and should not be used for diagnosis or treatment for HMB because it is clinically ineffective.

Defining HMB

It is difficult to define exactly what a heavy period is because it varies from person to person. A good indication that a person has HMB is if they:

- are having to change their sanitary products every hour or 2
- are passing blood clots larger than 2.5cm (about the size of a 10p coin)
- are bleeding through to their clothes or bedding
- need to use 2 types of sanitary product together (for example, tampons and pads)

It is expected that any patient referred to the individual funding request team for consideration of hysterectomy for HMB in isolation will have undertaken the following or have a documented rationale for why the following is not suitable;

- A trial of non-hormonal and hormonal methods in line with NICE guidance NG88¹. Each method should be used for a minimum period of 3 months and preferably 6 months. This includes:
 - Non-hormonal: tranexamic acid, NSAIDs (non-steroidal anti-inflammatory drugs)
 - Hormonal: Levonorgestrel-releasing intrauterine system (LNG-IUS), combined hormonal contraception, and cyclical oral progestogens.

Patients who do not respond to pharmacological treatment should ideally be referred to a “One Stop” menstrual disorder or similar clinic. Referral should include a recent full blood count. Ferritin levels are no longer recommended.

Exceptional circumstances may be considered where there is evidence of significant health impairment and there is also evidence of the intervention improving health status.

Clinical coding:

ICD10 Diagnosis Codes

Heavy/ Irregular Bleeding	N920 - Excessive and frequent menstruation with regular cycle N921 - Excessive and frequent menstruation with irregular cycle N925 - Other specified irregular menstruation N926 - Irregular menstruation, unspecified
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OPCS Procedure Codes

Hysterectomy	Q071 - Abdominal hysterocolpectomy and excision of periuterine tissue Q072 - Abdominal hysterectomy and excision of periuterine tissue NEC Q073 - Abdominal hysterocolpectomy NEC Q074 - Total abdominal hysterectomy NEC Q075 - Subtotal abdominal hysterectomy Q076 - Excision of accessory uterus Q078 - Other specified Q079 - Unspecified Q081 - Vaginal hysterocolpectomy and excision of periuterine tissue Q082 - Vaginal hysterectomy and excision of periuterine tissue NEC Q083 - Vaginal hysterocolpectomy NEC Q088 - Other specified Q089 - Unspecified vaginal excision of uterus
Dilation and Curettage	Q103 - Dilation of cervix uteri and curettage of uterus NEC Q108 - Other specified curettage of uterus Q109 - Unspecified

Version	Date	Reason for change
Version 2.0	Agreed May 2022 (Ratified by the Board – January 2023)	Three yearly policy review, update to reflect MHRA Drug Safety notice and amalgamation of two separate policies to one. Update includes definitions of HMB, clarifying wording and addition of examples of expected conservative treatment before referral for surgery, in line with the NICE clinical guideline.

¹ <https://www.nice.org.uk/guidance/ng88>