Abnormal Uterine Bleeding

- What is abnormal uterine bleeding?
- What is a normal menstrual cycle?
- At what ages is abnormal uterine bleeding more common?
- What causes abnormal uterine bleeding?
- How is abnormal uterine bleeding diagnosed?
- What tests may be needed to diagnose abnormal uterine bleeding?
- What factors are considered when deciding on a type of treatment?
- What medications are used to help control abnormal uterine bleeding?
- What types of surgery are performed to treat abnormal uterine bleeding?
- Glossary

What is abnormal uterine bleeding?

Bleeding in any of the following situations is abnormal:

- Bleeding between periods
- Bleeding after sex
- Spotting anytime in the menstrual cycle
- Bleeding heavier or for more days than normal
- Bleeding after *menopause*

Menstrual cycles that are longer than 35 days or shorter than 21 days are abnormal. The lack of periods for 3–6 months (amenorrhea) also is abnormal.

What is a normal menstrual cycle?

The menstrual cycle begins with the first day of bleeding of one period and ends with the first day of the next. In most women, this cycle lasts about 28 days. Cycles that are shorter or longer by up to 7 days are normal.

At what ages is abnormal uterine bleeding more common?

Abnormal uterine bleeding can occur at any age. However, at certain times in a woman's life it is common for periods to be somewhat irregular. They may not occur on schedule in the first few years after a girl has her first period (around age 9–16 years). Cycle length may change as a woman nears menopause (around age 50 years). It also is normal to skip periods or for bleeding to get lighter or heavier at this time.

What causes abnormal uterine bleeding?

Abnormal uterine bleeding can have many causes. They include the following:

- Pregnancy
- *Miscarriage*
- *Ectopic pregnancy*
- *Adenomyosis*

- Use of some birth control methods, such as an *intrauterine device (IUD)* or birth control pills
- Infection of the *uterus* or *cervix*
- *Fibroids*
- Problems with blood clotting
- *Polyps*
- *Endometrial hyperplasia*
- Certain types of cancer, such as cancer of the uterus, cervix, or vagina
- *Polycystic ovary syndrome*

How is abnormal bleeding diagnosed?

Your health care provider will ask about your personal and family health history as well as your menstrual cycle. It may be helpful to keep track of your menstrual cycle before your visit. Note the dates, length, and type (light, medium, heavy, or spotting) of your bleeding on a calendar .

You will have a physical exam. You also may have blood tests. These tests check your blood count and hormone levels and rule out some diseases of the blood. You also may have a test to see if you are pregnant.

What tests may be needed to diagnose abnormal uterine bleeding?

Based on your symptoms, other tests may be needed. Some of these tests can be done in your health care provider's office. Others may be done at a hospital or surgical center:

- Sonohysterography—Fluid is placed in the uterus through a thin tube, while ultrasound images are made of the uterus.
- Ultrasound—Sound waves are used to make a picture of the pelvic organs.
- Magnetic resonance imaging—In this imaging test, powerful magnets are used to create images of internal organs.
- Hysteroscopy—A thin device is inserted through the vagina and the opening of the cervix. It lets the health care provider view the inside of the uterus.
- Endometrial biopsy—Using a small or thin catheter (tube), tissue is taken from the lining of the uterus (endometrium). It is looked at under a microscope.

What factors are considered when deciding on a type of treatment?

The type of treatment depends on many factors, including the cause of the bleeding, your age, and whether you want to have children. Most women can be treated with medications. Others may need surgery.

What medications are used to help control abnormal uterine bleeding?

Hormonal medications often are used to control abnormal uterine bleeding. The type of hormone you take will depend on whether you want to get pregnant as well as your age. Birth control pills can help make your periods more regular. Hormones also can be given as an injection, as a vaginal cream, or through an IUD that releases hormones. An IUD is a birth control device that is inserted in the uterus. The hormones in the IUD are released slowly and may control abnormal bleeding.

Other medications given for abnormal uterine bleeding include nonsteroidal anti-inflammatory drugs (such as ibuprofen), tranexamic acid, and antibiotics. Nonsteroidal anti-inflammatory drugs can control bleeding and reduce menstrual cramps. Tranexamic acid is a drug used to treat heavy menstrual bleeding. Infections are treated with antibiotics.

What types of surgery are performed to treat abnormal uterine bleeding?

Some women may need to have surgery to remove growths (such as polyps or fibroids) that cause bleeding. Some fibroids can be removed with hysteroscopy. Sometimes other techniques are used.

Endometrial ablation may be used to control bleeding (see the FAQ Endometrial Ablation). It is intended to stop or reduce bleeding permanently. An endometrial biopsy is needed before ablation is considered.

Hysterectomy may be done when other forms of treatment have failed or they are not an option. Hysterectomy is major surgery. Afterward, a woman no longer has periods. She also cannot get pregnant.

Glossary

Adenomyosis: A condition in which the tissue that normally lines the uterus begins to grow in the muscle wall of the uterus.

Cervix: The opening of the uterus at the top of the vagina.

Ectopic Pregnancy: A pregnancy in which the fertilized egg begins to grow in a place other than inside the uterus, usually in the fallopian tubes.

Endometrial Hyperplasia: A condition that occurs when the lining of the uterus (endometrium) grows too much.

Fibroids: Benign (noncancerous) growths that form on the inside of the uterus, on its outer surface, or within the uterine wall itself.

Hysterectomy: Removal of the uterus.

Intrauterine device (IUD): A small device that is inserted and left inside the uterus to prevent pregnancy.