



WOMEN'S MEDICAL GROUP
OBSTETRICS – GYNECOLOGY – INFERTILITY

15151 NATIONAL AVENUE - LOS GATOS, CALIFORNIA 95032
PHONE: (408) 356-0431 - FAX: (408) 356-8569
www.lowmg.com

Novasure Endometrial Ablation

You're suffering from heavy menstrual bleeding; your doctor calls it menorrhagia. You don't really care what it's called, as long as it can be resolved. Today, an exciting new break-through offers you a treatment that is at once quick, simple, safe and complete. The NovaSure™ Impedance Controlled Endometrial Ablation System features rapid treatment time, excellent safety record, no required pre-treatment, high success rate, and fast recovery time. This is a treatment that can finally stop the heavy bleeding so that you can go on with your life.

What is menorrhagia?

Menorrhagia is excessive menstrual bleeding. If your bleeding lasts seven or more days per cycle, or is so excessive that you need to change protection nearly every hour, you may have menorrhagia. Women suffering from menorrhagia can experience fatigue, anemia, embarrassing accidents, and restricted activity. If you're familiar with these effects, you know that menorrhagia can disrupt your life. About 1 in 5 women experience unusually heavy menstrual bleeding. And there are now more treatment options available to you.

What are treatment options?

Drug therapy is typically the first treatment option, consisting of oral contraceptives or other hormones that treat hormonal imbalances. This therapy is effective only about 50% of the time, and usually must be continued in order to remain effective. Some women experience undesirable side effects, including headaches, weight gain, and nausea.

Dilation and curettage (D & C) is frequently the second option if drug therapy is ineffective. It is a common surgical procedure that involves scraping of the inside of the uterus. However, for the majority of women with menorrhagia, it's only a temporary solution that reduces bleeding for a few cycles.

Endometrial ablation is a minimally invasive surgical treatment option. Several methods are currently available: Conventional rollerball endometrial ablation removes the lining of the uterus with an electrosurgical tool. This method effectively reduces bleeding in approximately 85% of patients, and most women return to work within 3 days. Risks include perforation of the uterus, bleeding, infection, or even heart failure due to fluids used to open up or distend the uterus. Newer generation endometrial ablation devices are now available. Some devices destroy the endometrium by using heated fluid. Others use freezing temperatures to destroy the tissue. Recently, the NovaSure™ System, which uses a precisely controlled dose of energy, was made available for use in the U.S.

Hysterectomy or surgical removal of the uterus is the only definitive treatment for menorrhagia. Hysterectomy is a major procedure, performed in the hospital under general anesthesia, and is accompanied by surgical risks, hospitalization, and, depending on the technique used, a recovery period of up to 6 weeks.

What is the Novasure?

The NovaSure™ System provides an effective and minimally invasive outpatient alternative to hysterectomy, while avoiding the potential side effects and long-term risks of drug therapy. The

patented NovaSure™ System is a next-generation endometrial ablation device that delivers precisely measured electrical energy via a slender, hand-held device to remove the endometrial lining. This quick, simple to schedule procedure requires no incisions, can be performed in an outpatient setting, and generally takes less than five minutes to perform. This is significantly shorter than any other endometrial ablation procedure.

Most women will see a significant reduction in the level of their menstrual bleeding. In randomized,



controlled clinical studies of the NovaSure™ System, over 91% of patients returning for follow-up at 12 months had their bleeding reduced to light or moderate periods, and 41% reported that their bleeding had stopped completely. Many women may also experience meaningful added benefits: 63% of women treated with the NovaSure™ System experienced a reduction in dysmenorrhea (painful menstruation), and 45% had a reduction in PMS symptoms. Pre-menopausal women with heavy menstrual bleeding who have completed childbearing may be candidates for the NovaSure™

procedure. Your physician may perform diagnostic tests to rule out other abnormal uterine conditions, and your Pap smear and biopsy must be normal.

How does the Novasure work?

The application of energy is intended to permanently remove the endometrium (lining of the uterus), to reduce or eliminate future bleeding. Here's a look at how the procedure is performed: The doctor then extends the triangular mesh device through the wand where it expands to conform to the dimensions of your uterine cavity. Electrical energy is then delivered into the uterus on average for approximately 90 seconds. The triangular mesh device is then retracted back into the wand and removed from the uterus.

What can I expect after an ablation?

You may experience some post-operative uterine cramping and discomfort shortly after the procedure, which can generally be treated with mild pain medication such as Ibuprofen (e.g., Advil® or Motrin®). Some patients may experience nausea and vomiting as a result of the anesthesia. Watery and/or bloody discharge after an endometrial ablation is also common for several weeks after the procedure.

What are the risks of the procedure?

Your physician will explain the surgical risks of all treatment options in detail. Some of the risks of endometrial ablation procedures are perforation of the uterus, bleeding, infection, injury to organs within the abdomen and pelvis, and accumulation of blood within the uterus due to scarring. A possible hazard may exist for women with cardiac pacemakers or other active implants. Another rare, but important, risk of any endometrial ablation procedure is that it may decrease your doctor's ability to make an early diagnosis of cancer of the endometrium. The reason for this is that one of the warning signs of endometrial cancer is bleeding, and endometrial ablation procedures decrease or eliminate bleeding.

Can I get pregnant after an ablation?

It is important to know that although the chances for pregnancy are reduced following an endometrial ablation procedure, it is still possible to become pregnant. However, pregnancy following endometrial ablation is very dangerous for both the mother and the fetus. You should not have the NovaSure™ procedure if you think you want to have a baby in the future.

You should use some form of birth control if you decide to have endometrial ablation. Please discuss these options with your physician.