

Pathway	
	Hysterectomy for heavy menstrual bleeding.
Pathway	
	Heavy menstrual bleeding due to uterine pathology.
Commissioned	
	<p>Hysterectomy should be considered only when:</p> <ol style="list-style-type: none"> 1. Other treatment options have failed or are contraindicated; 2. There is a wish for amenorrhoea (no periods); 3. The woman (who has been fully informed) requests it; 4. The woman no longer wishes to retain her uterus and fertility.
Rationale	
	<ul style="list-style-type: none"> ▪ Evidence-Based Interventions: Response to the public consultation and next steps. Published by NHS England in partnership with NHS Clinical Commissioners, the Academy of Medical Royal Colleges, NHS Improvement and the National Institute for Health and Care Excellence November 2018. ▪ Based on NICE guidelines [Heavy menstrual bleeding: assessment and management [NG88] Published date: March 2018], hysterectomy should not be used as a first-line treatment solely for heavy menstrual bleeding. ▪ When agreeing treatment options for HMB with women, take into account: the woman's preferences, any comorbidities, the presence or absence of fibroids (including size, number and location), polyps, endometrial pathology or adenomyosis, other symptoms such as pressure and pain. ▪ Consider an LNG-IUS (levonorgestrel-releasing intrauterine system) as the first treatment for HMB in women with: no identified pathology or fibroids less than 3 cm in diameter, which are not causing distortion of the uterine cavity or suspected or diagnosed adenomyosis. ▪ If a woman with HMB declines an LNG-IUS or it is not suitable, consider the following pharmacological treatments: non-hormonal: tranexamic acid, NSAIDs (non-steroidal anti-inflammatory drugs), hormonal: combined hormonal contraception, cyclical oral progestogens. Be aware that progestogen-only contraception may suppress menstruation, which could be beneficial to women with HMB. ▪ For women with submucosal fibroids, consider hysteroscopic removal.
Cohort	
	Adults.
Equality	
	Compliant with the Equality Act 2010.
Status	
	AMBER as defined in the Prior Approval Scheme Policy.

OPCS codes	
Abdominal hysterocolpectomy and excision of periuterine tissue	Q07.1
Abdominal hysterectomy and excision of periuterine tissue NEC	Q07.2
Abdominal hysterocolpectomy NEC	Q07.3
Total abdominal hysterectomy NEC	Q07.4
Subtotal abdominal hysterectomy	Q07.5
Excision of accessory uterus	Q07.6
Other specified abdominal excision of uterus	Q07.8
Unspecified abdominal excision of uterus	Q07.9
Vaginal hysterocolpectomy and excision of periuterine tissue	Q08.1
Vaginal hysterectomy and excision of periuterine tissue NEC	Q08.2
Vaginal hysterocolpectomy NEC	Q08.3
Other specified vaginal excision of uterus	Q08.8
Unspecified vaginal excision of uterus	Q08.9
Version History	
New policy.	
Authorised	
April 2019	
Review	
April 2024 Earlier if new evidence published by NICE or other authoritative body.	