

CLINICAL POLICY ADVISORY GROUP (CPAG)

Dilatation and Curettage (D&C) for Heavy Menstrual Bleeding in Women Policy

Derby and Derbyshire ICB, in line with its principles for procedures of limited clinical value has deemed that **Dilatation and Curettage (D&C) for Heavy Menstrual Bleeding in Women** should not be commissioned.

These commissioning intentions will be reviewed periodically. This is to ensure affordability against other services commissioned by the ICB.

1. Background

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

2. Recommendation

NHS England Evidence-based Interventions position is that D&C should not be used for diagnosis or treatment for heavy menstrual bleeding in women because it is clinically ineffective.

Ultrasound scans and camera tests with sampling of the lining of the womb (hysteroscopy and biopsy) can be used to investigate heavy periods. Medication and intrauterine systems (IUS) can be used to treat heavy periods.

3. Rationale for Recommendation

NICE guidelines recommend that D&C is not offered as a treatment option for heavy menstrual bleeding. There is very little evidence to suggest that D&C works to treat heavy periods and the one study identified by NICE showed the effects were only temporary.

D&C should not be used to investigate heavy menstrual bleeding as hysteroscopy and biopsy work better. Complications following D&C are rare but include uterine perforation, infection, adhesions (scar tissue) inside the uterus and damage to the cervix.

4. Useful Resources

- Heavy menstrual bleeding: assessment and management. NICE Guideline NG88 (March 2018) Last updated May 2021. <https://www.nice.org.uk/guidance/ng88>
- NHS Website: Hysteroscopy. <https://www.nhs.uk/conditions/hysteroscopy/#alternatives-to-hysteroscopy>

5. References

- MacKenzie IZ, Bibby JG. Critical assessment of dilatation and curettage in 1029 women. *Lancet* 1978;2(8089):566–8.
- Ben-Baruch G, Seidman DS, Schiff E, et al. Outpatient endometrial sampling with the Pipelle curette. *Gynecologic and Obstetric Investigation* 1994;37(4):260–2.
- Gimpelson RJ, Rappold HO. A comparative study between panoramic hysteroscopy with directed biopsies and dilatation and curettage. A review of 276 cases. *American Journal of Obstetrics and Gynecology* 1988;158(3 Pt 1):489–92.
- Haynes PJ, Hodgson H, Anderson AB, et al. Measurement of menstrual blood loss in patients complaining of menorrhagia. *British Journal of Obstetrics and Gynaecology* 1977;84(10):763–8.
- [Dilatation & curettage for heavy menstrual bleeding - EBI \(aomrc.org.uk\)](https://www.aomrc.org.uk) (Accessed 12/03/2024)

6. Appendices

Appendix 1 - Consultation

All relevant providers/stakeholders will be consulted via a named link consultant/specialist. Views expressed should be representative of the provider/stakeholder organisation. CPAG will consider all views to inform a consensus decision, noting that sometimes individual views and opinions will differ.

| Consultee | Date |
|---|---------------|
| CPAG | November 2021 |
| Clinical and Lay Commissioning Committee (CLCC) | December 2021 |
| Obstetrics & Gynaecology Consultant, CRH | March 2024 |

Appendix 2 - Document Update

| Document Update | Date Updated |
|--|---------------------|
| Policy Updated Version 3.0 <ul style="list-style-type: none">• Policy has been re-worded and reformatted to reflect the DDCCG clinical policies format. This includes the addition of background, rationale for recommendation, useful resources, references and consultation.• Removal of 'This procedure requires prior approval. Prior approval must be sought through Blueteq.' as requested by contracting) | September 2021 |
| Version 3.1 <ul style="list-style-type: none">• Policy review date extended by 12 months in agreement with clinical stakeholders. | March 2024 |