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Endometrial curettage

The purpose of this information leaflet is to introduce the endometrial curettage procedure to the patient.

An **endometrial** curettage, i.e. **uterine cavity cleaning**, is a procedure used to remove the lining of the uterine cavity and send it for examination. The procedure is performed to clarify a diagnosis or to stop bleeding.

A tissue examination is needed to find the cause of the bleeding and to develop the most suitable treatment plan.

Indications for the procedure

A uterine cavity cleaning is performed if the patient has:

- unexplained uterine bleeding;
- pathology of the uterine lining detected during an ultrasound examination;
- atypical results found during a cervical oncocytology examination.

Before the procedure

In order to avoid vomiting and prevent acidic stomach contents from entering the airways, you must **not eat for six hours and not drink for at least four hours** prior to the procedure. **You must also not smoke or chew gum.** If you have a chronic illness (e.g. arterial hypertension or asthma) and you have been prescribed treatment, take your daily medications the morning of the procedure. Taking a few sips of water to swallow the tablets is permitted and safe. The only exceptions are diabetes medications, which generally need to be taken with food.

Empty your bladder before the procedure.

To reduce the risk of complications, please inform your doctor before the surgery:

- of your current state of health and any illnesses;
- of your regular medications;
- if you know that you are hypersensitive to a certain medication.

Procedure process

The procedure is performed by a gynaecologist. The endometrial curettage is preceded by a gynaecological examination and then you will receive short-term anaesthesia. The cervix is dilated using specific instruments.

The uterine lining is removed from the uterine cavity and sent for examination. The procedure takes about 5–15 minutes.

Possible complications

Complications may arise during the procedure. Possible complications include:

- allergic reactions to medications;
- bleeding;
- injury to the uterus by an instrument (in rare case, adjacent organs may also be injured).

In the event of complications, surgical treatment may be needed. In the worst case, complications can lead to the removal of the uterus. Infection of the internal genital organs may occur after curettage (treated with antibiotics).

After the procedure

You will be in the hospital for a few hours after the procedure for observation. You can leave the hospital once you have recovered from anaesthesia and the cannula has been removed. You must not drive or perform any other activities that require rapid responses for 24 hours after the procedure, as the medications used for anaesthesia may slow down your reaction time.

Vaginal bleeding may occur for up to two weeks after endometrial curettage. It is therefore not recommended to:

- have sexual intercourse for at least two weeks;
- take a bath, go to a hot sauna or go swimming;
- catch a cold;
- use tampons.

If you develop heavy bleeding, fever (above 38 °C) or severe lower abdominal pain, go to the Women's Clinic reception at the East Tallinn Central Hospital (open 24 hours a day) immediately.

Unless you have been told otherwise, you will find out the **results of the examination** from your gynaecologist.

If you have any questions or need more information, please consult your doctor or nurse.

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