Heavy menstrual bleeding

Treatment choice

A decision aid to support discussions about the different treatment options commonly available during pandemics.

Heavy menstrual bleeding affects up to 1 in 3 women.

The Cochrane Gynaecology and Fertility Group has summarised the research evidence for treatments which are commonly available during pandemics.

1. Antifibrinolytics
   - Tranexamic acid
     - Dose: 1g
     - Frequency: Three times a day for five days
   - Seizures
   - Blood clots in the legs or lungs

2. NSAIDs
   - Mefenamic acid
     - Total dose: 500mg
     - Frequency: Three times a day
   - Headaches
   - Dizziness
   - Indigestion

3. Combined hormonal contraceptives
   - Combined oral contraceptive pill
     - Total dose: Variable
     - Frequency: Once a day
   - Mood changes
   - Headache
   - Nausea
   - Weight gain

All treatments reduce heavy menstrual bleeding.

Treatments can be unsuitable for certain women:
- Not advised in women with a history of:
  - Seizures
  - Blood clots in the legs or lungs
- Not advised in women with a history of:
  - Heartburn
  - Stomach ulcers
- Not advised in older women or women with a history of:
  - Inflammatory bowel disease
  - Blood clots in the legs and lungs

Treatments can cause common side effects affecting 1 in 10 women:
- Nausea and vomiting
- Diarrhoea
- Headaches
- Dizziness
- Indigestion
- Blood clots in the legs and lungs
- Mood changes
- Headache
- Nausea
- Weight gain

Only combined hormonal contraceptives can provide reliable contraception:
- Does provide reliable contraception
- Cannot be used for contraception
- Breast tenderness
- Break-through bleeding
- Smoking
- Obesity
- High blood pressure
- Blood clots in the legs and lungs

All women with heavy menstrual bleeding should increase their dietary intake of iron and consider iron supplements.

Read the full review at cochranelibrary.com

Contact: Dr James Duffy

@jamesmduffy  james.duffy3@nhs.net