Novasure® Endometrial Ablation: Effectiveness and Patient Satisfaction


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Abstract

Objective: The purpose of this study was to describe effectiveness of and patient satisfaction with Novasure® endometrial ablation in patients with dysfunctional uterine bleeding. Novasure procedures performed in the outpatient clinic (OPC) and the operating theater (OT) were compared. Design: This was a retrospective cohort study. Materials and Methods: The study was conducted on all Novasure endometrial ablation procedures (n=112) performed between April 2007 and October 2008 on patients diagnosed with dysfunctional uterine bleeding in the Meander Medical Centre, Amersfoort, The Netherlands. Data were collected from medical records and a retrospective questionnaire. Main outcome measures were effectiveness: the presence of amenorrhea, dysmenorrhea and blood clots, and menstruation duration. Pain experience and patient satisfaction scores ranged from 0 to 10. Results: After Novasure treatment an amenorrhea rate of 51.4% was found. The mean menstruation duration significantly decreased, as well as the presence of blood clots and dysmenorrhea (p<0.001). Mean patient satisfaction score was 8.5 and patient satisfaction was significantly higher in the OT group (p=0.027). A hysterectomy rate of 1.9% was noted after a follow-up period of 6 months up to 2 years. Conclusions: Novasure endometrial ablation is an effective treatment option for patients with dysfunctional uterine bleeding, when performed in both the OPC and OT. Novasure treatment in the OPC is good option for a selected patient population. Significantly lower patient satisfaction was found in the OPC, probably resulting from the pain experienced by these patients. High pain experience during menstruation prior to the Novasure predicts for high pain experience of the Novasure treatment. Therefore, treatment in the OPC is recommended only for patients without dysmenorrhea. (J GYNECOL SURG 28:1)