



What are the benefits of this procedure?

The procedure may help your doctor arrive at a better diagnosis. In addition, depending on the diagnosis, the scraping of the uterine lining may

help treat your problem.

What are the risks associated with this procedure?

There are some risks when you have general anesthesia. Discuss these risks with your doctor.

A regional anesthetic may not numb the area quite enough and you may feel some minor discomfort. Also, in rare cases, you may have an allergic reaction to the drug used in this type of anesthesia. In most cases regional anesthesia is considered safer than general anesthesia.

The uterus may be hurt or punctured (perforated) by the curette and require surgery.

The walls of the uterus may bleed more after the procedure than before the procedure.

There is a small chance the uterus will become infected as a result of this procedure.

You should ask your doctor how these risks apply to you.

When should I call my doctor?

Call your doctor right away if:

- You have heavy bleeding from the uterus (you need more than 1 pad or tampon per hour or the bleeding is heavier than your normal menstrual flow).
- You develop a fever over 100°F (37.8°C).
- You have severe abdominal pain or abdominal pain that continues even after you take acetaminophen or aspirin.
- You have a foul-smelling discharge from the vagina.

Call your health care provider during office hours if:

- You have questions about the procedure or its result.
- You want to make another appointment.



Information contained in this booklet is meant for informational purposes only and should not substitute the visit to your doctor nor his/her advice for your health care.

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Dilation and Curettage
(D&C)



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DILATATION & CURETTAGE

Dilatation and curettage (D&C) is a minor surgical procedure used to get a sample of tissue from the lining of the uterus (the endometrium) or to remove tissue from the uterine cavity. The uterus is the organ at the top of the vagina. Babies develop in the uterus, and menstrual blood comes from the uterus.

Dilatation is performed to open and widen the cervix (entrance to the uterus). There are two main types of D&Cs, diagnostic and therapeutic.

Diagnostic D&C

It is used to sample the lining of the uterus. The tissue sample is sent to the lab for tests.

This procedure is used to look for the cause of unusual uterine bleeding, recurrent pelvic pain, or enlargement of the uterus.

In some cases alternatives to this procedure may be:

endometrial biopsy (a sample of the inner layer of the uterine wall is removed using a tiny straw-like tube)

hysteroscopy (dilating the cervix and using a scope to look at the inside of the uterus).

Therapeutic D&C

A therapeutic D&C may be done to:



- *Treat heavy bleeding from the uterus.*
- *Remove polyps from the uterus.*
- *Remove an IUD.*
- *Remove pieces of placenta after childbirth.*
- *Remove a miscarriage (spontaneous abortion).*
- *Remove incomplete, missed, or induced abortions.*
- *Perform an abortion.*



Examples of alternative treatments are:

- *having a hysteroscopy* (dilating the cervix and using a scope to look at the inside of the uterus and remove parts of the uterine lining).
- *treating the problem with medicines, such as hormones*

Another alternative is to choose not to have any procedure, recognizing the possible risks of your condition.

How do I prepare for a D&C?

Plan for your care and recovery after the procedure. Allow for time to rest. Try to find people to help you with your day-to-day duties.

Follow instructions provided by your doctor. Regardless of the type of anesthesia, eat a light meal, such as soup or salad, the night before the procedure. Do not eat or drink anything after midnight and the morning before the procedure. Do not even drink coffee, tea, or water. Arrange to have someone take you home and stay with you for a while after the procedure.

What happens during the procedure?

You are given a sedative or a regional or general anesthetic. A sedative helps you relax. A

regional anesthetic numbs part of your body while you remain awake. It should keep you from feeling pain during the operation. A general anesthetic relaxes your muscles and causes a deep sleep. It will prevent you from feeling pain during the procedure.

Your doctor stretches open (dilates) your cervix and guides a scoop-like instrument (a curette) into the uterus. Your doctor uses the curette to lightly scrape the lining of the uterus to get a piece of it or to remove tissue from the cavity. The tissue will be sent to the lab for tests.

What happens after the procedure?

If there are no complications, you may go home a few hours after the procedure. Expect some bleeding and menstrual-type cramps for the first day or so. Your doctor may suggest a pain medicine to relieve the discomfort. Women who are still having periods usually have their next period 2 to 6 weeks after the D&C.

Do not place anything inside the vagina until your doctor says it is safe. Do not use tampons for a few weeks after the D&C. Follow your doctor's instructions about when you can have sexual intercourse.

Ask your doctor what other steps you should take and when you should come back for a checkup.

