

Uterine health: talking to your doctor about your symptoms

Conversation starters

Maybe you've never discussed what you're experiencing with your doctor and you're not sure where to start. If getting the conversation started seems hard, try one of these openers:

- "I'd like to ask you a few questions about my menstrual cycle..."
- "I've noticed that my periods are different than they used to be..."
- "I've heard that many women are getting treated for heavy periods... is this something I should consider?"
- "My lower back and legs are really painful when I'm on my period; is that normal?"
- "I feel like I'm constantly bloated no matter how much I diet/exercise; what's up with that?"
- "I've missed work or important events because of my period; are there any treatments available that will help me manage the pain?"
- "Sex has become painful for me; should it be?"
- "My period pain management routine is no longer cutting it; what can you do to help?"

Before your visit you should

Keep a journal to track your bleeding for a few cycles or try to write down notes from memory that includes the following information:

- Number of days bleeding
- What type of protection you need each day (for example, light pantiliner or heavy pad, light or more absorbent tampon, or even double protection)
- How frequently you need to change protection each day
- If you notice any clots in your flow
- Any other symptoms (such as fatigue, cramps, lower back and leg pain, bloating, etc.)
- How your life is affected by your periods (missing work, social or athletic activities, etc.)

Questions to ask the doctor

- What might be causing my symptoms?
- Do I need to have any tests?
- If I'm experiencing symptoms, how long should I wait to get treatment?
- What are my treatment options?
- What does each one involve?
- What types of treatments do you perform?
- What success rates have you had with each?
- What is the best treatment for me?

Notes and other questions:

Uterine health: talking to your doctor about fibroids and polyps

Part 1

If your doctor tells you that you may have fibroids or polyps, here are some questions you may want to ask:

- What problems can the fibroid(s) or polyp(s) cause?
- What tests or imaging studies are best for keeping track of the growth of my fibroid(s) or polyp(s)?
- What are my treatment options if my fibroid(s) or polyp(s) becomes a problem?

Part 2

If your doctor has confirmed that you have fibroids or polyps, here are some questions you may want to ask:

- How many fibroids or polyps do I have?
- What size are my fibroid(s) or polyp(s)?
- Where are my fibroid(s) or polyp(s) located?
- How rapidly have the fibroid(s) or polyp(s) grown (if you already knew about the fibroid(s))?
- How will I know if the fibroid(s) or polyp(s) are growing larger?

Treatment options

Questions to ask your doctor:

- What are my treatment options?
- What does each one involve?
- What types of treatments do you perform?
- Do you offer minimally-invasive options like the Acessa procedure or hysteroscopic myomectomy?
- What success rates have you had with each?
- What is the best treatment for me?

Notes and other questions:

MyoSure® | **NovaSure®** | **Acessa®**

IMPORTANT SAFETY INFORMATION

The Acessa ProVu system is intended to identify and shrink symptomatic uterine fibroids. The Acessa ProVu system is used by trained physicians during laparoscopic surgery under general anesthesia. Rare but serious risks of this procedure include, but are not limited to, infection, internal injury, blood loss and complications related to laparoscopic surgery and/or general anesthesia. This procedure is not recommended for women who are planning future pregnancy. This information is not medical advice. Please discuss the risks and benefits with your doctor to find out if the Acessa procedure may be right for you.

MyoSure tissue removal system is intended to remove unwanted tissue from the uterus. During a MyoSure procedure, a trained gynecologist inserts the MyoSure device through your vagina and then removes the unwanted tissue from inside the uterus. Use of the MyoSure system is not appropriate for patients who are or may be pregnant, or have signs or symptoms of a pelvic infection, cervical cancer, or previously diagnosed uterine cancer. As with any surgical procedure, there are potential risks including but not limited to internal injury, excessive bleeding, and complications related to anesthesia. Temporary side effects may include cramping, bleeding, fever, and nausea. This information is not medical advice. Please discuss the risks and benefits with your doctor to find out if the MyoSure procedure may be right for you.

NovaSure endometrial ablation is for premenopausal women with heavy periods due to benign causes who are finished childbearing. During a NovaSure procedure, a trained gynecologist inserts the NovaSure device through your vagina and then treats the uterine lining—the endometrium. Because pregnancy following the NovaSure procedure is still possible and dangerous, it is important to talk to your doctor about birth control or permanent sterilization following the procedure. The NovaSure procedure is not for those who have or suspect uterine cancer; have an active genital, urinary or pelvic infection; or an IUD. As with any surgical procedure, there are potential risks including but not limited to internal injury, infection, and complications related to anesthesia. Temporary side effects may include cramping, nausea, vomiting, discharge and spotting. This information is not medical advice. Please discuss the risks and benefits with your doctor to find out if the NovaSure procedure may be right for you.

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