

# Essentials for the diagnosis and treatment of Heavy Menstrual Bleeding

The HELP group is a panel of independent physicians from 12 countries with expert interest in HMB. Formation of the HELP group and its ongoing work is supported by Bayer AG

**On average, HMB affects one in three women<sup>1,2</sup>**

## 1 Establish if HMB is a problem for this woman

### How much does she bleed?

- ✓ Changes sanitary protection during the night
- ✓ On her heavy days, changes sanitary protection <2 hours
- ✓ Experiences excessively long, frequent and/or unpredictable periods

### Does it affect her physically?

- ✓ Passes large blood clots
- ✓ Feels faint or breathless during her period

### Does her monthly bleeding affect her daily life?

- ✓ Organizes social activities or plans clothing around menstrual bleeding
- ✓ Worries about having accidents related to bleeding

### Does one or more of the above apply, and have the symptoms been occurring for 3+ months?

If yes, HMB is impacting negatively on quality of life. Take further action to identify cause and appropriate treatment options.

## 2 Take a structured medical history and conduct physical examination

### What do you need to consider? Potential factors contributing to presence of HMB

- Obesity
- Lifestyle (smoking, alcohol intake)
- Hereditary factors
- Unopposed estrogen
- Diabetes
- Age (> 40years)
- Medications
- Anovulation

### Other physical symptoms which may indicate pathology (besides frequent and/or heavy bleeding)

- Post-coital bleeding
- Intermenstrual bleeding
- Pelvic pressure
- Pain

## 3 Consider if there is an identifiable (PALM-COEIN<sup>3</sup>) cause for her HMB

Structural causes	Non-structural causes
<ul style="list-style-type: none"> <li>• Polyps</li> <li>• Adenomyosis</li> <li>• Leiomyomas (submucosal or other)</li> <li>• Malignancy &amp; hyperplasia</li> </ul>	<ul style="list-style-type: none"> <li>• Coagulopathy</li> <li>• Ovulatory dysfunction</li> <li>• Endometrial</li> <li>• Iatrogenic</li> <li>• Not yet specified</li> </ul>

**For the majority of women, there is no identifiable cause of HMB<sup>4</sup>**

## 4 Conduct further investigations where indicated

**Complete blood count**  
Required for all women

**Thyroid function**  
If endocrine cause suspected

**Inherited coagulation disorders**  
If indicated by structured history

**Ultrasound scan**  
To rule out structural cause of HMB

**Endometrial biopsy**  
If endometrial pathology suspected

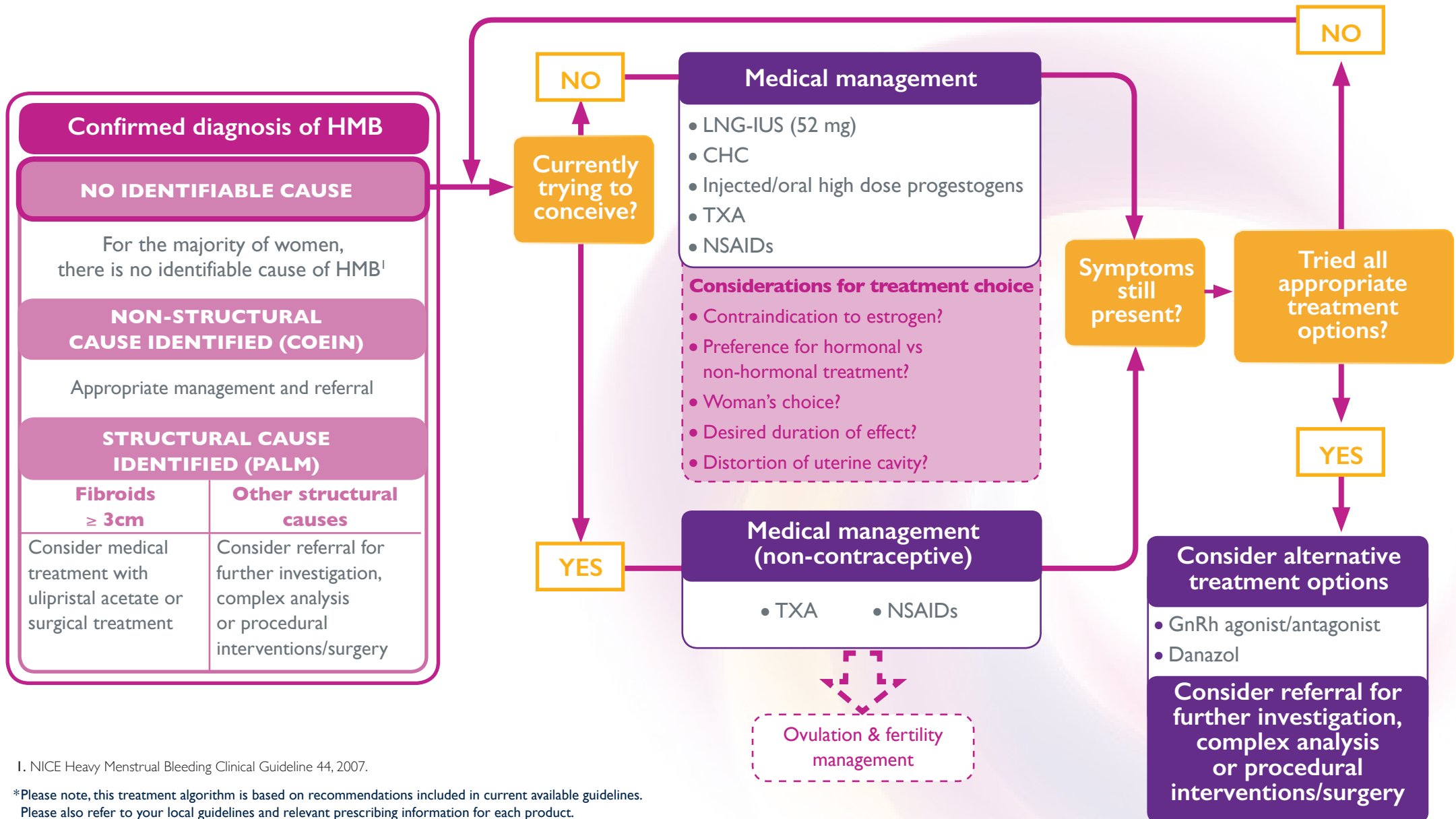
## 5 Provide reassurance and offer treatment

**Treatment of anemia**  
If present

**Medical or surgical treatment**  
Using the algorithm overleaf

**Interim treatment**  
While awaiting further investigation or test results

# The HELP treatment algorithm for HMB\*



1. NICE Heavy Menstrual Bleeding Clinical Guideline 44, 2007.

\*Please note, this treatment algorithm is based on recommendations included in current available guidelines. Please also refer to your local guidelines and relevant prescribing information for each product.