

Heavy menstrual bleeding guideline

Summary of changes to the final documents since the consultation period

Main issues raised during consultation:

The main issues raised during the stakeholder consultation and the Institute's validation processes were in relation to the following recommendations:

- Content of the patient information pack
- Concerns that LNG-IUS should not be initial treatment for HMB
- Ablation (does not mention hydro thermal ablation (HTA) or bi-polar options)
- Criteria for each method of hysterectomy
- Criteria for investigations and treatments.
- Structure of the Full version
- Algorithm

Major changes to the final document

Patient information pack

The NICE "Understanding NICE Guidance" should be used as the information pack. (Compare 1.3.1.1 against in the draft version 1.3.1 and footnote 6 in the final version)

Pharmaceuticals

The recommendation has been reworded to highlight the need for healthcare professional consideration of the recommended order of treatment options. LNG-IUS remains the most cost effective option. (Compare 1.4.1.1 in the draft version against 1.5.2 in the final version)

Ablation

Other cost effective ablation techniques should be considered and are now listed in the recommendation. (Compare 1.7.2.3 in the draft against 1.7.5 in the final version)

Hysterectomy

The original recommendation has been split, so that there is one for vaginal and abdominal routes and another for laparoscopic routes. These specify the situations when each route should be used. (Compare 1.9.1.2 against 1.9.4 in the draft and 1.9.5 in the final version)

Clarification of investigation and treatment use

The criteria for each investigation or treatment have been added. This has included when to undertake physical examination, imaging, pharmaceutical,

surgical and radiological interventions. (See 1.2.4, 1.2.6, 1.2.14, 1.5.1, 1.7.1, 1.8.1, 1.8.2, 1.9.1 and 1.9.3 in the final version)

Structure

A number of chapter headings have been changed or the chapter combined with others. For example, the original patient education chapter has been split into patient education and patient choice.

A number of recommendations have been moved to more appropriate chapters. For example, the indications for surgery recommendations have been moved to the relevant chapter.

Algorithm

The algorithm has been reformatted.