NATIONAL INSTITUTE FOR CLINICAL EXCELLENCE

INTERVENTIONAL PROCEDURES PROGRAMME

Interventional procedures overview of photodynamic endometrial

ablation

Introduction

This overview has been prepared to assist members of the Interventional Procedures Advisory Committee advise on the safety and efficacy of an interventional procedure previously reviewed by SERNIP. It is based on a rapid survey of published literature, review of the procedure by Specialist Advisors and review of the contents of the SERNIP file. It should not be regarded as a definitive assessment of the procedure.

Date prepared

This overview was prepared in November 2002.

Procedure names

• Photodynamic endometrial ablation.

Specialty societies

• Royal College of Obstetricians and Gynaecologists.

Description

Indications

Heavy menstrual periods, also known as menorrhagia.

Menorrhagia is a very common problem. No routine data was found on the numbers of gynaecological procedures carried out each year in the UK by indication. In 2000/2001 about 45,000 hysterectomies and 17,000 therapeutic endoscopic uterine procedures were carried out in England (Hospital Episode Statistics; ungrossed for missing data; Department of Health). About half of these are likely to be for heavy menstrual bleeding.¹

Summary of procedure

Hysterectomy has been the traditional treatment for women with menorrhagia that has not responded to medical treatment. Minimally invasive procedures to destroy the lining of the uterus (endometrium) may reduce complications and recovery time compared with hysterectomy. These include hysteroscopic procedures, which involve destroying the endometrium with lasers, radiofrequency waves or electrocautery, and non-hysteroscopic procedures, which involve destroying the endometrium using heated saline, a heated balloon, lasers, or microwaves. Non-hysteroscopic procedures can often be carried out on a day admission under local anaesthetic.

Photodynamic endometrial ablation is a new non-hysteroscopic procedure that involves the injection of a photosensitive chemical into the uterine cavity through a hysterosalpingography catheter. Laser is transmitted from a probe inserted through the cervix. This activates the photosensitive chemical, which the destroys the endometrium.

Literature review

Appraisal criteria

Studies of photodynamic endometrial ablation in women with menorrhagia were included.

List of studies found

No controlled studies were found.

One case series was found.¹

Table 1 Summary of key efficacy and safety findings

Study details	Key efficacy findings	Key safety findings	Key reliability and validity issues
Wyss P ¹	'Reduction' in bleeding reported by	No complications reported	Uncontrolled case series.
	both women with menorrhagia		
Case series			No assessment of pain or discomfort
	Post menopausal woman had		during operation.
Zurich, Switzerland	hysterectomy 5 months later		
Date not stated (published 1998)	No general or local anaesthesia		
	required		
n = 2 women with menorrhagia			
n = 1 woman with prolonged			
postmenopausal bleeding			
Manage following One of the			
Mean follow up: 6 months			

Validity and generalisability of the studies

• Only one very small case series was found. This provides very limited information on safety and efficacy.

Bazian comments

• Several studies were found of photodynamic endometrial ablation in animals.

Specialist advisors' opinions

- Specialist advice was sought from the *Royal College of Obstetricians and Gynaecologists*.
- Photodynamic endometrial resection is experimental and not yet ready for clinical use. The photosensitive chemical used may cause skin photosensitivity.

Issues for consideration by IPAC

• None other than those discussed above.

References

1. Wyss P, Fehr M, Van den Bergh H, Haller U. Feasibility of photodynamic endometrial ablation without anesthesia. *Int J Gynecol Obstet* 1998; 60: 287–88.

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