

Feel like your life revolves around your period?

Heavy menstrual bleeding affects 1 in 5 women and can have a negative impact on their life.

Heavy menstrual bleeding, known medically as menorrhagia, affects women physically and mentally. It can affect your mood, energy, work, social life and your general well-being.

Approximately one half of all cases of heavy menstrual bleeding have no obvious cause. In other cases, the possibility of uterine abnormalities or hormonal imbalances may exist. Other physical problems may also cause menorrhagia and might include uterine fibroids or polyps, infection, cancer, or a bleeding disorder.

You might have menorrhagia if you have

- ☒ A heavy menstrual flow that keeps you from carrying out your daily routine
- ☒ Menstrual periods that include large blood clots
- ☒ Menstrual periods lasting longer than one week
- ☒ Symptoms resembling anemia or feelings of fatigue

Talk to your doctor to learn more.

How do we treat menorrhagia?

Menorrhagia can be treated nonsurgically or surgically.

Nonsurgical options: drug therapy (birth control pills or other types of hormones) or intrauterine devices are typically the first treatment option for women who wish to maintain fertility. It is not always effective in controlling excessive bleeding and some women may experience side effects.

Surgical options include:

- **Dilatation and curettage:** a procedure that removes endometrium and may provide temporary relief of heavy periods lasting only a few cycles. This may be a treatment option for women who want more children.
- **Hysterectomy:** the removal of the uterus, a major surgical procedure. It is performed in a hospital under general anaesthesia. It may require hospitalization and a recovery period of up to 6 weeks.
- **Hysteroscopic endometrial ablation:** eliminates the lining of the uterus with an electrosurgical tool or laser. This requires general anesthesia and is also associated with increased surgical risks. This is not appropriate for women wanting to maintain fertility. Risks may include: uterine perforation, bleeding, infection and heart/lung failure due to fluids required in the procedure.
- **New minimally invasive endometrial ablation methods:** there are a variety of new generation endometrial ablation devices that use different methods to destroy the lining of the uterus. These include heated fluid systems and radiofrequency energy systems. Endometrial ablation allows for fast recovery with return to normal activities within a few days. The most common adverse events following endometrial ablation are pelvic pain, cramping and nausea/vomiting. These will generally resolve within 12 to 24 hours of the procedure. As with all Endometrial Ablation procedures there is a risk of complications leading to death or serious injury. Other potential risks include uterine perforation, bleeding, infection, severe pain, cramping, vaginal discharge, injury to other organs such as pelvic blood vessels, bowel or urinary tract, and unintentional burns.

All methods carry risks, although they are reduced in less invasive methods. The method of treatment used will be dependent upon your individual circumstances and should be discussed with your doctor.

If you wish to maintain fertility, endometrial ablation, by any method, is not an option for you.

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Do heavy menstrual periods affect your quality of life?

There is a solution.



 **Thermablate[®]EAS**

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Reduce or stop the flow of your period in less than two and a half minutes

What is Thermablate?

Thermablate is a clinically proven, gentle **two and a half minute** treatment that can significantly reduce or stop the flow of your menstrual period.

Thermablate is

- A safe, minimally invasive treatment for menorrhagia
- An alternative to hysterectomy or other surgical treatment
- A well tolerated outpatient treatment requiring no hospital stay
- Effective: in studies comparing various treatment options, 95% of women reported the greatest improvement in menorrhagia with Thermablate with 85% of them experiencing a dramatic or complete reduction in bleeding

Is the Thermablate treatment right for me?

The Thermablate system is used in premenopausal women with menorrhagia due to benign causes for whom child bearing is complete.

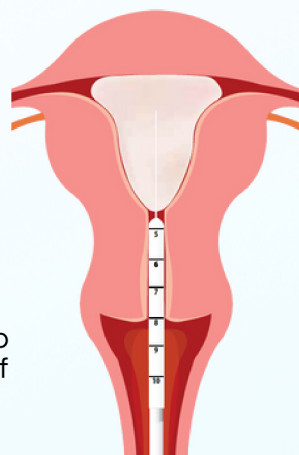
Your physician will do some preliminary tests which may include blood work, hysteroscopy, biopsy, and/or a pap smear to determine the cause of your bleeding.

How does Thermablate work?

The treatment can be done in an outpatient clinic or the operating room depending on whether you want to be awake or fully asleep.

The doctor will gently insert a soft, flexible silicone balloon attached to a thin catheter into your uterus.

The balloon is inflated with heated glycerin solution and expands to fit the size and shape of your uterus.



You and your physician will decide what type of pain medication will be best for you to relieve cramping and discomfort.

After the treatment:

Your physician may prescribe medication if you experience some discomfort such as cramping. Other symptoms you may experience are nausea and vomiting.

Patients will normally be allowed to go home within a few hours. You can normally resume work and family commitments the following day. It is typically recommended you refrain from sexual activity and the use of tampons for one week after the treatment in order to reduce the risk of infection.

Ablation & Pregnancy

A Thermablate treatment does not prevent you from becoming pregnant. Pregnancy after any type of an ablation treatment can result in serious health complications. Please discuss contraception options with your physician.

Choose simplicity.




The vast majority of women experience positive changes in their life after a Thermablate procedure. These may include:

- Freedom to live a normal life
- Financial benefits
- Better health
- Increased energy

Women worldwide choose to have a Thermablate treatment to improve every aspect of their lives.



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