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Dilation & Curettage

(D & C)

Summary

Dilation and curettage (D & C) is a procedure in which the opening of the **cervix** is stretched and tissue from the **uterus** is removed. This minor surgical procedure can be used to diagnose conditions such as cancer of the uterus and to treat conditions such as **abnormal uterine bleeding**. D & C can also used to remove tissue that remains in the uterus after a **miscarriage** and to perform an induced **abortion** beyond the first trimester.



During D & C the uterus is widened (dilated) using instruments called dilators. Then, the physician removes tissue by suction. In some cases, a long metal instrument with a loop on the end (curette) will be used to scrape the walls of the uterus after suctioning, a process known as curettage.

D & C can be performed in a physician's office, clinic or hospital. The health of the patient and the type of **anesthesia** to be used will determine the most appropriate setting. D & C is typically an outpatient procedure that takes approximately 10 minutes to perform. It is generally very safe, and in most cases patients can resume their normal activities within a few days.

About dilation and curettage

Dilation and curettage is a minor surgical procedure in which the **cervix** is widened (dilated) and a physician gently suctions (aspirates) tissue from inside the **uterus**. In some cases, a

long metal instrument with a loop on the end (curette) will be used to scrape the walls of the uterus after suctioning, a process known as curettage. This helps ensure that no tissue is left behind in the uterus.

Also known as D & C, this procedure is performed to either diagnose or treat various gynecological conditions. D & C is used for the following reasons:

- Treatment of **abnormal uterine bleeding**. This is the most common reason that D & C is performed. If a woman is of reproductive age, a physician initially is most likely to prescribe **hormone** medications to stabilize the uterine lining and to keep it from bleeding abnormally. However, if this is not successful, an operation may be recommended to help determine the cause of the uterine bleeding so that it can be more effectively treated.
- Removal of tissue after **miscarriage**. D & C is often used to remove fetal or placental tissue that remains inside the uterus after a miscarriage.
- Removal of abnormal growths and cancer. Abnormal growths in the uterus can occasionally cause bleeding. Sometimes, these growths are **polyps**, which develop from the lining of the uterus or cervix. A cervical polyp may cause irritation during sexual intercourse whereas a uterine polyp may cause abnormal bleeding. In other cases, the growth may be a **fibroid**, which forms from the cells that make up uterine muscle. A fibroid can cause abnormal bleeding if it protrudes into the uterine cavity. During D & C, these growths may be scraped off. The tissue will then be sent to a laboratory to make sure that the growths are not cancerous. Most growths especially fibroids are noncancerous.
- Performing an induced **abortion** beyond the first trimester. Dilation and curettage is the most common method of induced abortion used beyond the first trimester (12 weeks). It usually involves suction and use of forceps to remove the **fetus**. In some cases, the uterus may be gently scraped to ensure that all tissue has been removed. D & C has several advantages over other second trimester procedures (such as induction of uterine contractions). These include greater convenience, lack of need for hospitalization and lower cost.
- Treatment of **endometrial hyperplasia**. D & C can be used to thin the lining of the uterus in women who have endometrial hyperplasia, a condition in which the uterine lining has become too thick.
- Diagnosis of excessive **menstrual bleeding**. In the past, dilation and curettage was frequently used to gain a sample of the uterine lining to check for the source of abnormal menstrual bleeding. However, it is not used as much for this purpose today, as more effective methods are available.
- Diagnosis of other disorders. D & C samples are often analyzed when trying to diagnose conditions such as the source of severe menstrual pain or infertility problems.



Before and during dilation and curettage

Prior to dilation and curettage (D & C), patients should follow all preparatory steps recommended by their physician. These may include dietary restrictions or medication changes.

The procedure can be performed in a physician's office, outpatient clinic or hospital. The health of the patient and the type of **anesthesia** to be used will determine the most appropriate setting.

Some patients may be given a sedative before the procedure, and intravenous fluids may be administered before or after entering the operating area. Just prior to the procedure, the **vaginal** area will be gently washed.

The patient will be positioned on her back with her knees bent and her feet in stirrups. Tools known as dilators will be inserted into the vagina and **cervix**, and will be used to gradually open the muscles of the cervix, which are strongly contracted.

Once the cervix is sufficiently dilated, the physician will insert a thin, spoon-shaped instrument (a curette) into the patient's **uterus** to scrape its lining (**endometrium**). Depending on the patient's underlying health condition, the physician will either remove:

- A sample of the endometrium for testing
- The portion of the endometrium causing excessive bleeding
- The remaining fetal or placental tissue (in the case of miscarriage)
- The fetus (in the case of abortion)

Once the procedure has been completed, a sanitary napkin (pad) will placed over the vagina. The entire procedure usually takes about 10 minutes.

D & C is typically a "blind" procedure, meaning that the physician cannot see into the patient's uterus during the procedure. However, in some cases D & C may be accompanied by other procedures such as **hysteroscopy**, in which a small, lighted telescope is used to view the inside of the uterus.

After the dilation and currettage procedure

Following the dilation and curettage (D & C) procedure, patients will usually spend about 30 minutes in the recovery room. In some cases, patients may be required to stay overnight at the hospital. This is usually a precaution for women who have another health condition, such as heart disease or diabetes. Patients also may be required to remain in the hospital if complications related to the surgery arise.

However, in most cases, the patient is allowed to return home within a few hours of the procedure. Patients should arrange to have someone drive them home from the hospital or clinic. Patients can usually return to their regular activities within a day or two, including their jobs as long as they do not involve physical labor. However, women should refrain from sexual intercourse and the use of **tampons** for at least seven days. Santiary napkins (pads) can be used during this time. Douches should also be avoided for two weeks following the procedure to prevent exposure to bacteria that may cause infection or inflammation.

Patients will receive oral medication to treat any postoperative pain, such as severe cramps. Pain usually disappears within 24 hours. Patients may also receive antibiotics to prevent infection. It is not unusual for patients to experience slight bleeding or staining for five to 14 days following the procedure.

In most cases, the results of any laboratory analysis of tissues are available within several days.

Following D & C, new tissue will replace any tissue that was removed from the uterus. A woman's next **menstrual period** may be either early or late. The D & C procedure leaves no scar.

Potential risks with dilation and curettage

Dilation and curettage (D & C) is a safe procedure which has a very low risk of complications. In rare cases, there may be damage if an instrument perforates the connective tissue of the **cervix** or **uterine** wall. This can cause bleeding and infection.

If the procedure needs to be performed when the cervix is still thick and firm, stretching can occur, resulting in a condition called *cervical incompetence*. This may interfere with the success of subsequent **pregnancies**. In rare circumstances, scarring of the uterine wall also can impact future **fertility**.

Questions for your doctor

Preparing questions in advance can help patients to have more meaningful discussions with their physicians regarding their conditions. Patients may wish to ask their doctor the following questions related to dilation and curettage:



- 1. Why is dilation and curettage the most appropriate procedure for my condition?
- 2. How should I prepare for the procedure?
- 3. Will I be required to remain in the hospital?
- 4. How long is the recovery period?
- 5. Are there any limitations on my activities following the procedure?

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