



Ambulatory Minitouch Endometrial Ablation: Efficacy at 2 year

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Introduction

Minitouch endometrial ablation is increasingly used in outpatient setting for heavy menstrual bleeding (HMB) but presently there is scarce data on its efficacy. Here we describe 2-year outcomes of women who underwent outpatient Minitouch ablation over a period of 1 year at the South Tees Hospitals.

Methodology

It was a retrospective study where we collected data on 52 women who attended for outpatient Minitouch ablation procedure for HMB between 1st Jan 2018 and 31st Dec 2018. . All women were planned to have a telephonic follow up at 6 months

Case notes were reviewed to collect the data on a proforma and analysed using google sheets. They were also checked to see if any further gynaecology treatment received in the trust within the next 2 years following the procedure. Time period: Jan 2018- Dec 2018

Results

Age 32-55, Mean 45.5, Median 46

Parity: Range 0-3, Median 2

Analgesia : 47 (87%) had both co-dydramol and NSAID, rest either one or none

At least 30 min before the procedure

Procedure Stats:

Sound length: Range 6-12 cm, mean 8, Median 8

Treatment time: Range 58-193 sec, Mean 121, Median 110

Treatment stages:1-2 in 75%

Outcome at 6 months

Unable to contact : 20

Followed up :32

8/32- amenorrhoea

14/32-

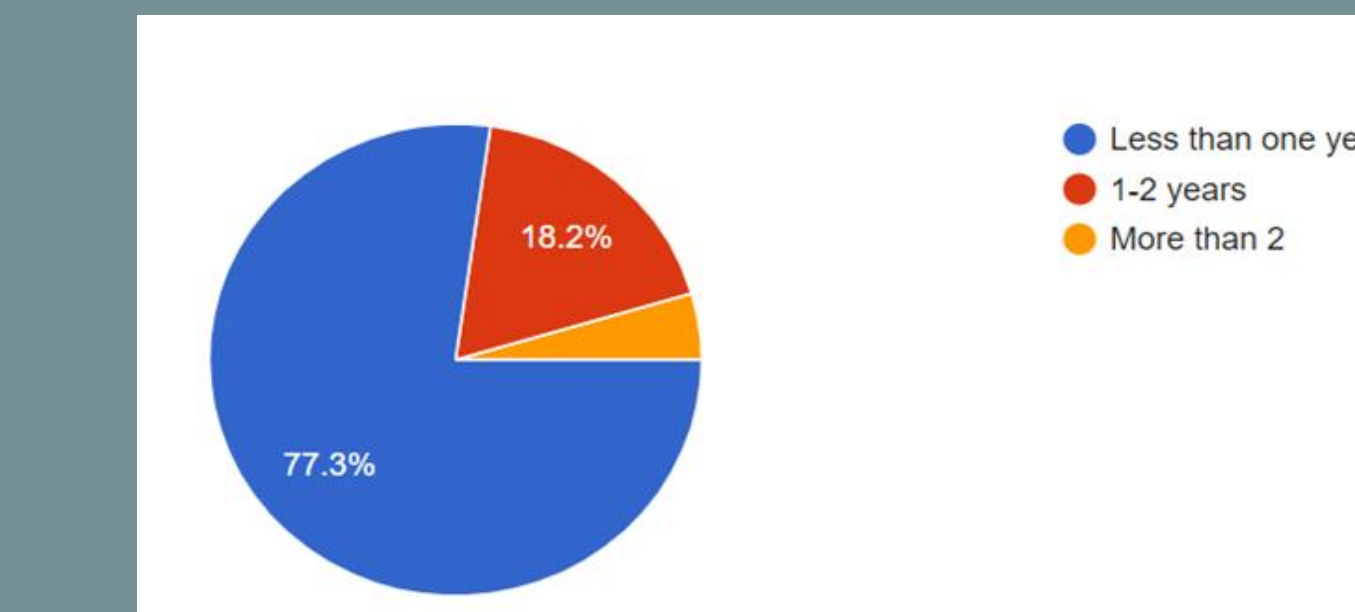
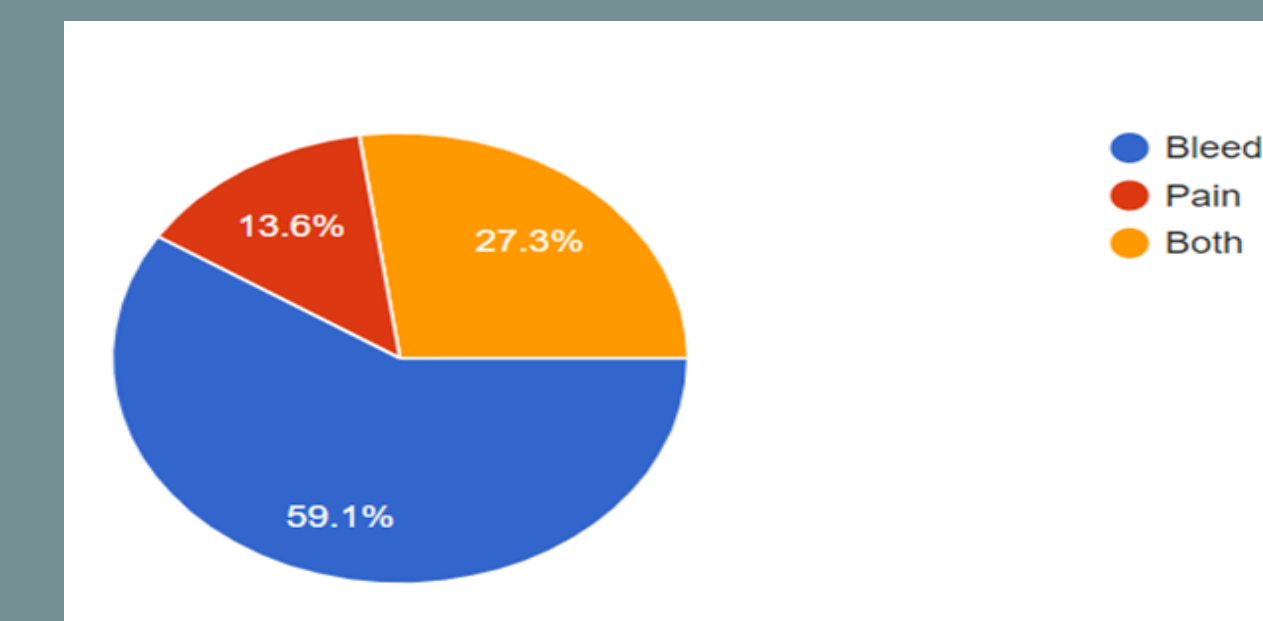
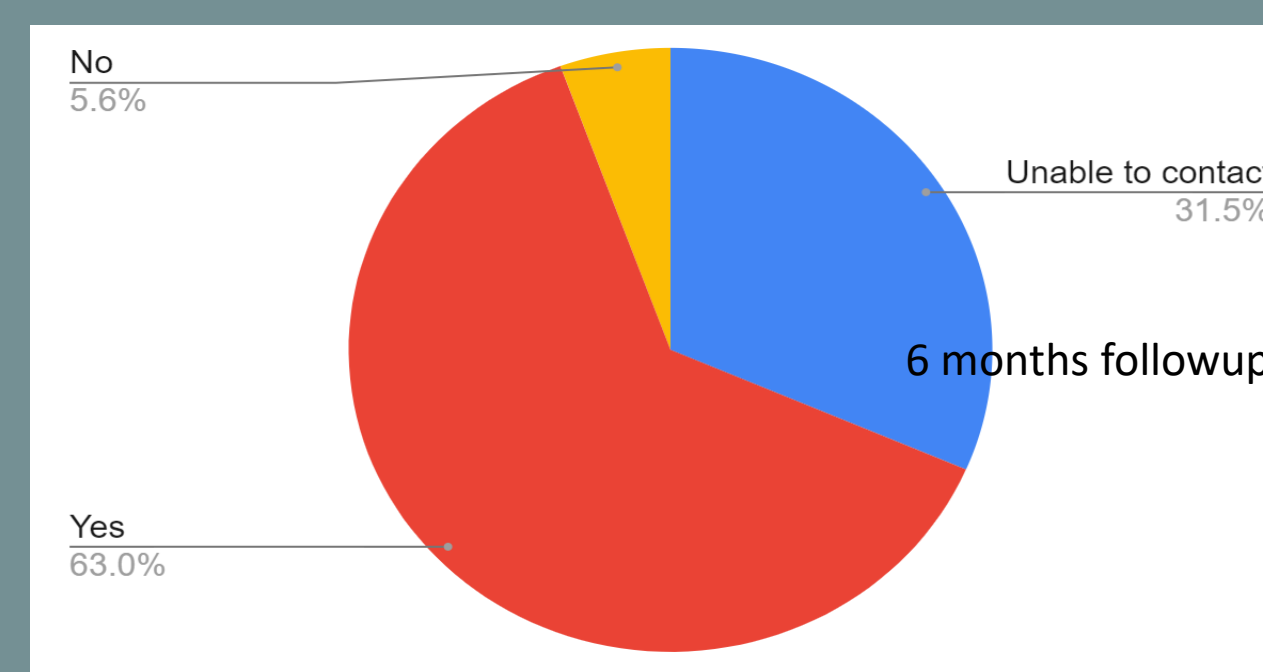
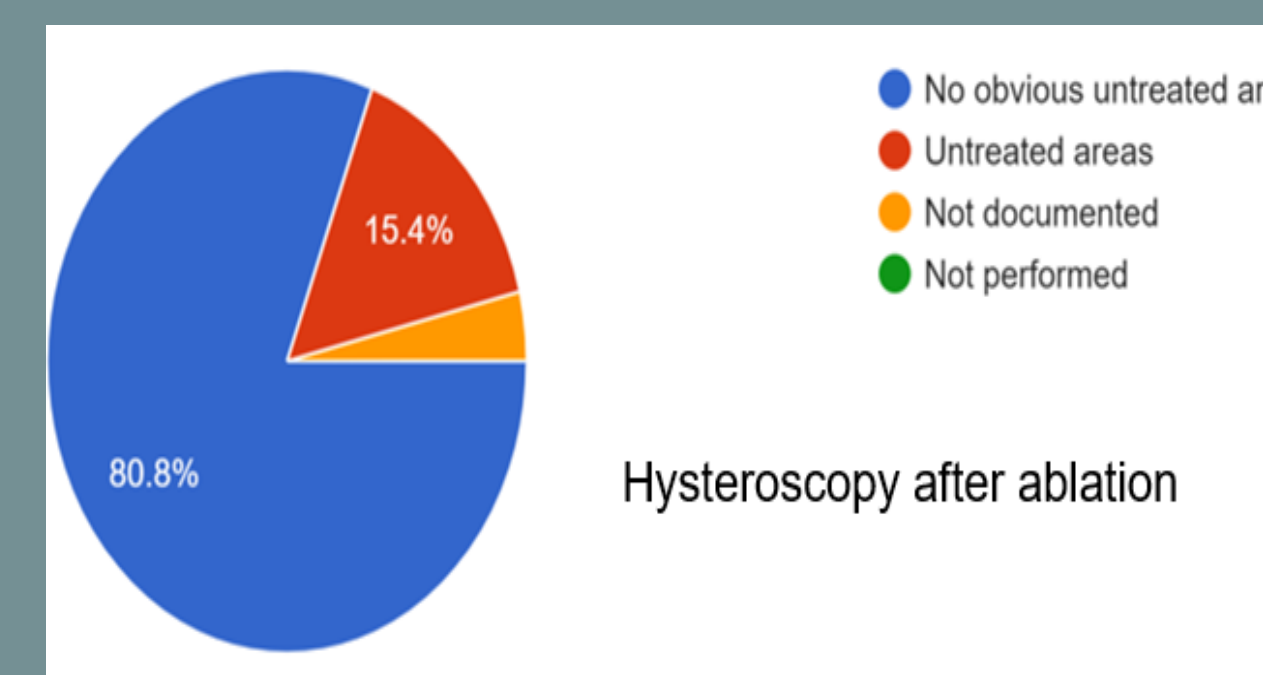
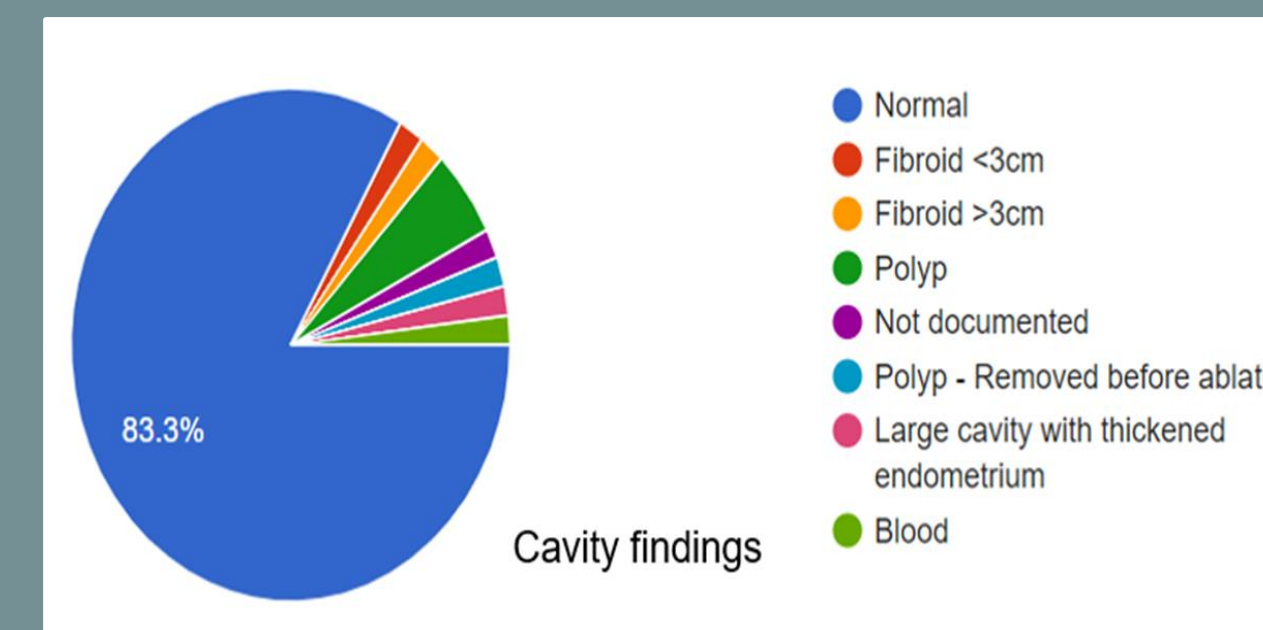
Hypomenorrhoea/better

10/32 – no change (31%)

7/32 – new pain (21%)

Outcome at 2 year

21/52 (40%) were seen again



4/21 – Expectant management as able to cope with symptoms
17/21 –Reintervention (32.6%)

Pharmaceutical treatment - 4

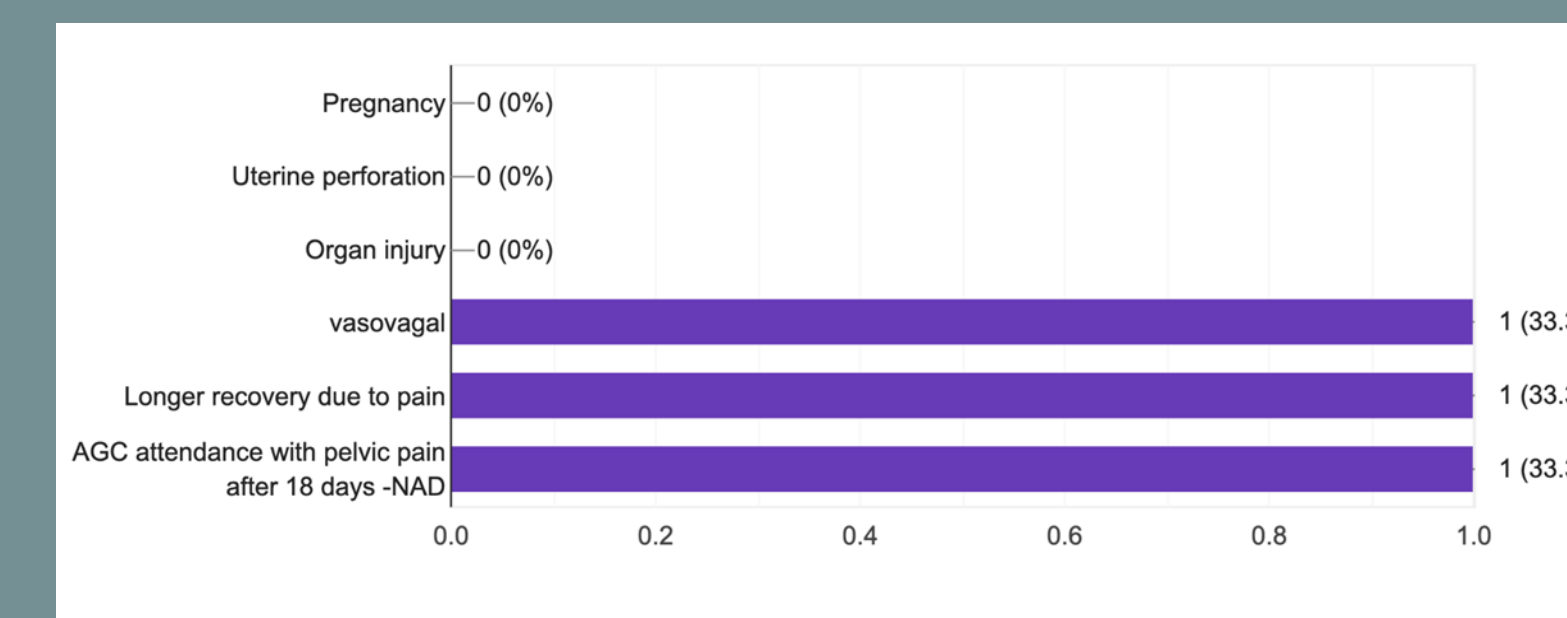
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TCRE awaiting hysterectomy- 1

Pharmaceutical treatment then

hysterectomy – 5

Hysterectomy – 6



Mean	Reintervention (n=17)	No Reintervention (n=35)
Age	32-52 yr (mean 45.7)	37-55 yr (mean 44.8)
Sound length	7-12 cm (mean 8.7)	6-10 cm (Mean 8.1)
Treatment time	72-193 se (Mean 122)	58-184 (Mean 120)
Stages of treatment	1-3 (mean 2)	1-3 (Mean 1.9)
Untreated areas	2/17 (12%)	6/35 (17%)

Results

Median age of patients was 46 years, with a median parity of 2. Median uterine cavity length was 8 cm, median treatment time was 110 sec and 75% of women had 1-2 staged treatment. The response rate for the 6-month follow-up was 63% (32/52) of these 69% reported hypo/amenorrhoea and 21% reported de novo pain. 40% (21/52) women were seen again when followed up 2 years- 59% with bleeding, 13.6% with pain and 27.3% with both. 32.6% (17/52) needed reintervention (medical treatment, ablation or hysterectomy). Overall hysterectomy rate in this group was 21%.

Conclusion

The data on the effectiveness of Minitouch is very limited especially beyond 6 month follow up. Our study demonstrates an overall success rate of 67.4% at 2 years follow up. The EASE clinical trial to assess the safety and effectiveness of Minitouch endometrial ablation with a 3 year follow up is ongoing and will provide us with more evidence