

MEDICAL AND SURGICAL TREATMENT OF HEAVY MENSTRUAL BLEEDING COMPARED TO MIRENA

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Heavy menstrual bleeding or menorrhagia together with other menstrual disorders such as dysmenorrhea have been reported to seriously affect approximately 2.5 million women annually in the USA and cost US industry 8% of the total wage bill. Approximately 10-15% of fertile women suffer from heavy menstrual bleeding, defined as a menstrual blood loss of > 80 ml and annually millions of women still undergo hysterectomy because of menorrhagia.

Since operative treatment carries a not insignificant risk of morbidity and mortality, various forms of medical therapy have been advocated as first-line treatment. The levonorgestrel intra-uterine system (LNG-IUS), Mirena[®] releases 20mg of levonorgestrel daily and has an effective life span of 5 years and has been evaluated in the treatment of menorrhagia. The LNG- IUS reduced menstrual blood loss (MBL) by 86% and 97%, 3 and 6 months after insertion in women with menorrhagia. Concomitant with the reduction in MBL serum ferritin and other indicators of iron balance improved.

A randomized comparative trial of the LNG-IUS and mefenamic acid for the treatment of idiopathic menorrhagia was recently performed. There was a reduction in MBL, total menstrual fluid loss and pictorial blood loss with both forms of treatment, but the reduction in patients using the LNG-IUS was significantly greater than that with mefenamic acid. Thus, there is now conclusive evidence to show that use of the LNG-IUS is effective in the treatment of menorrhagia.

The clinical outcome and costs with the LNG-IUS have been compared with hysterectomy for treatment of menorrhagia in a five year randomized trial. The authors concluded that by providing improvement in health-related quality of life at a relatively low cost the LNG-IUS may offer a wider availability of choices for the patient and may decrease costs due to interventions by surgery.

It can be concluded that the LNG-IUS is effective in the treatment of menorrhagia. This statement is supported by the recent assessment of treatment modalities for heavy menstrual bleeding performed by NICE (The National Institute for Health and Clinical Excellence). The conclusions of this assessment were that the LNG-IUS system is first line pharmaceutical treatment if treatment is anticipated to last for at least 12 months.