Dilatation and curettage (D&C)

Summary

- A dilatation and curettage (D&C) is an operation performed on women to scrape away the womb lining.
- D&C is a form of treatment for a range of conditions including incomplete miscarriage, polyps or unwanted pregnancy.
- D&C can be used as a diagnostic test if, for example, cancer of the uterus is suspected.

Problems that may require D&C

D&C can be used as a diagnostic test or as a form of treatment for a range of conditions. Some of the problems that may require D&C include:

- A history of abnormal menstrual bleeding, such as heavy bleeding (menorrhagia) or bleeding between periods
- Polyps (small growths protruding from the mucous membrane of the uterus)
- Uterine infection
- Incomplete abortion (miscarriage)
- Surgical abortion
- Heavy bleeding after childbirth
- Suspicion of uterine cancer
- Investigations of female infertility.

Medical issues to consider with D&C

You will be advised to have nothing to eat or drink for at least six to eight hours before the surgery. In some cases, you are given an injection an hour before your operation to make you feel drowsy and help dry up internal fluids. Women younger than 35 years are generally advised against undergoing D&C, unless there is no other alternative.

Procedure for D&C operation

D&C is regarded as a relatively minor operation and can be done as day surgery, but a general anaesthetic is usually given. The typical D&C procedure includes:

- Once you are anaesthetised, your uterus is examined to determine its size and position.
- The walls of the vagina are held apart by an instrument called a speculum (the same instrument used during a Pap test).
- If you aren’t having general anaesthetic, an instrument is inserted to both position the cervix and administer local anaesthetic.
- Rods (dilators) that increase in size are introduced into the cervix, one at a time, to gently widen the entrance of the cervix (os) to the right diameter.
- A spoon-shaped curette is inserted through the dilated cervix and into the uterus.
- The lining of the uterus (endometrium) is scraped off using the curette.
- What happens next depends on the condition. For example, the scraping procedure concludes the surgical abortion, while tissue samples will be prepared and taken to a laboratory for investigation if the D&C was needed to help diagnose suspected uterine cancer.

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Immediately after D&C

After surgery you can expect:

- Nurses to record your vital signs such as temperature, pulse and blood pressure.
- You are observed for any vaginal bleeding.
- You shouldn’t need pain relief after the operation, although some patients experience mild abdominal cramps. A light pain-killing tablet may be suggested.
- You should be able to get out of bed within a few hours and often are allowed home four to six hours after the operation if there is no vaginal bleeding.
- If you have lost a lot of blood before the operation, you might be required to stay in hospital overnight.
- Make arrangements for someone to come and collect you from the surgery or hospital, as you should not drive until at least the next day.

Complications of D&C

Some of the possible complications of D&C include:

- Reactions to the medications used, such as allergic reaction to the general anaesthesia
- Cervical damage due to dilation or the passage of instruments
- Haemorrhage (bleeding)
- Infection of the uterus or other pelvic organs
- Scar tissue within the uterus, if the scraping was too vigorous
- Puncture or perforation of the uterus.

Taking care of yourself at home after D&C

Be guided by your doctor or surgeon, but general suggestions include:

- Some cramping or mild abdominal discomfort is considered usual after a D&C. See your doctor if you are concerned or in pain.
- You should take any medication as ordered by your doctor.
- If you are taking antibiotics, make sure to take the whole course, even if you feel well.
- You should not have sexual intercourse for a week or so if possible.
- Avoid putting anything into your vagina, including tampons or douches, for at least one week or preferably two.
- If you experience any signs of infection (such as fever, pain or discharge) see your doctor immediately.

Long-term outlook after D&C

D&C is used to help diagnose certain conditions such as cancer of the uterus. Your doctor will let you know when the results of your laboratory tests are available.

Treatment depends on the diagnosis. For example, if cancer is diagnosed, treatment options include hysterectomy (surgical removal of the uterus), radiotherapy, chemotherapy and hormone therapy.

Other forms of treatment

Alternatives to D&C depend on the condition. Termination of pregnancy in the first three months is generally by suction curettage.

For menorrhagia, for example, other forms of diagnosis and treatment include:

- Using a catheter (thin hollow tube) to take a sample of endometrial tissue for diagnostic purposes.
- A hysteroscope (a type of slender telescopic device) is generally advised for taking tissue samples from older women.
- Another diagnostic test is the vaginal ultrasound. This involves introducing a slender device into the vagina to take ‘sound pictures’ of the uterus.
- The oral contraceptive pill can be used to treat menorrhagia.
• An intrauterine device (IUD) that's impregnated with the hormone progesterone can reduce heavy menstrual flow in some cases.

Where to get help

• Your doctor
• Jean Hailes for Women's Health Tel. 1800 532 642
• Australasian Menopause Society Tel. (03) 9428 8738
• Family Planning Victoria Inc. Tel. 1800 013 952 or (03) 9257 0100
• Dr Marie™ Tel. 1300 003 707

Things to remember

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