

PATIENT EDUCATION



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

Dilation and Curettage

Dilation and curettage (D&C) is a surgical procedure that is used to diagnose and treat many conditions that affect the **uterus**. Dilation means to open the **cervix** so that a thin instrument can be introduced into the uterus for the procedure. Curettage involves removing tissue from the inside of the uterus.

This pamphlet explains

- reasons a D&C may be done
- what to expect during the procedure
- risks of the procedure
- recovery

Reasons for a D&C

A D&C may be done to find out the cause of abnormal bleeding. It provides a sample of the tissue that lines the uterus. This sample can be viewed under a microscope to tell whether any **cells** are abnormal. A D&C also may be done after a **miscarriage** or abortion to remove tissue that has remained in the uterus. A D&C may be done with other procedures, such as **hysteroscopy**, in which a thin, lighted telescope is used to view the inside of the uterus.

The D&C Procedure

A D&C can be done in a health care professional's office, a surgery center, or a hospital. Your health care professional may want to start dilating your cervix before surgery using **laminaria**. This is a slender rod of natural or synthetic material that is inserted into the cervix. It is left in place for several hours. The rod

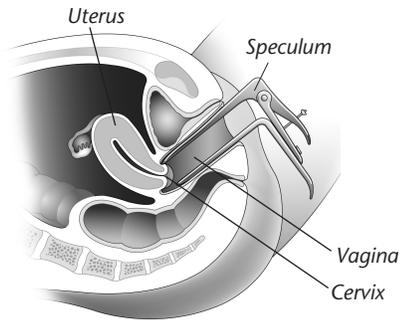
absorbs fluid from the cervix and expands. This causes the cervix to open. Medication also may be used to soften the cervix, making it easier to dilate (open).

Before or during your D&C, you may receive some type of **anesthesia**. You and your health care professional will discuss the type to be used. With **general anesthesia**, you will not be awake during the procedure. You will receive medication either through an intravenous line or a mask. With **regional anesthesia**, you will be awake. Often you will have medication to make you drowsy.

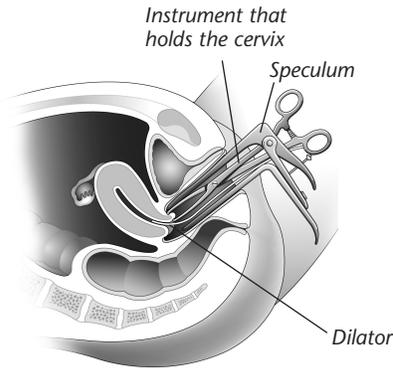
During the procedure, you will lie on your back and your legs will be placed in stirrups. A **speculum** will be inserted into your vagina. The cervix will be held in place with a special instrument.

If your cervix needs to be dilated (opened), this will be done by inserting a series of rods through the cervical opening. Each rod will be slightly larger than the last one. Usually only a small amount of dilation is needed (less than one half inch in diameter).

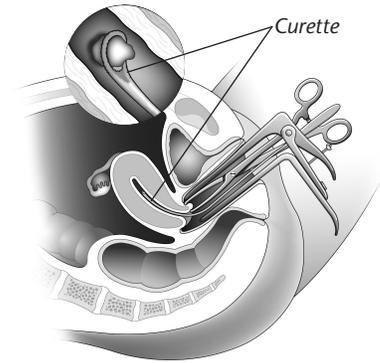
The D&C Procedure



1. The walls of the vagina are held open with a speculum.



2. The cervix is held in place with an instrument while the opening is dilated (opened) with a series of tapered rods.



3. Part of the uterine lining is gently loosened and removed with a curette.

Tissue lining the uterus will be removed, either with an instrument called a curette or with suction. In most cases, the tissue then will be sent to a laboratory for examination.

Risks

Complications are rare. When they do occur, they include bleeding, infection, or perforation of the uterus (when the tip of an instrument passes through the wall of the uterus). If perforation occurs, nearby organs may be damaged and further surgery may be required. Problems related to the anesthesia used also can occur.

In rare cases, after a D&C has been performed after a miscarriage, bands of scar tissue, or **adhesions**, may form inside the uterus. This is called Asherman syndrome. These adhesions may cause infertility and changes in menstrual flow. In most women, Asherman syndrome can be treated successfully with surgery. Call your health care professional if you notice changes in your menstrual periods after a D&C procedure.

Recovery

After the procedure, you probably will be able to go home within a few hours. You will need someone to take you home. You should be able to resume most of your regular activities in 1 or 2 days.

If you had general anesthesia, you may have some nausea and vomiting when you wake up. You may feel groggy and weak for a short while. You may have a sore throat from the tube that was inserted into your windpipe to help you breathe.

Pain after a D&C usually is mild. You may have spotting or light bleeding. You should contact your health care professional if you have any of the following:

- Heavy bleeding from the vagina
- Fever
- Pain in the abdomen
- Foul-smelling discharge from the vagina

After a D&C, a new lining will build up in the uterus. Your next menstrual period may not occur at the regular time. It may be early or late.

Until your cervix returns to its normal size, bacteria from the vagina can enter the uterus and cause infection. It is important not to put anything into your vagina after the procedure. Ask your health care professional when you can have sex or use tampons again.

Your health care professional will ask that you make an appointment to see him or her soon after your D&C to discuss the results. If further treatment is needed, your health care professional will discuss it with you.

Finally...

A D&C is done to find the cause of abnormal uterine bleeding or to remove tissue after a miscarriage or abortion. The recovery period usually is short. If you have questions about the procedure, discuss them with your health care professional.

Glossary

Adhesions: Scars that can make tissue surfaces stick together.

Anesthesia: Relief of pain by loss of sensation.

Cells: The smallest units of a structure in the body. Cells are the building blocks for all parts of the body.

Cervix: The lower, narrow end of the uterus at the top of the vagina.

General Anesthesia: The use of drugs that create a sleep-like state to prevent pain during surgery.

Hysteroscopy: A procedure in which a lighted telescope is inserted into the uterus through the cervix to view the inside of the uterus or perform surgery.

Laminaria: Slender rods made of natural or synthetic material that expand when they absorb water. Laminaria are inserted into the opening of the cervix to widen it.

Miscarriage: Loss of a pregnancy that is in the uterus.

Regional Anesthesia: The use of drugs to block sensation in a region of the body.

Speculum: An instrument used to hold open the walls of the vagina.

Uterus: A muscular organ in the female pelvis. During pregnancy, this organ holds and nourishes the fetus.

This information was designed as an educational aid to patients and sets forth current information and opinions related to women's health. It is not intended as a statement of the standard of care, nor does it comprise all proper treatments or methods of care. It is not a substitute for a treating clinician's independent professional judgment. Please check for updates at www.acog.org to ensure accuracy.

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This is EP062 in ACOG's Patient Education Pamphlet Series.

ISSN 1074-8601

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