

Trends in hysterectomy for heavy menstrual bleeding for NSW 2008-2017

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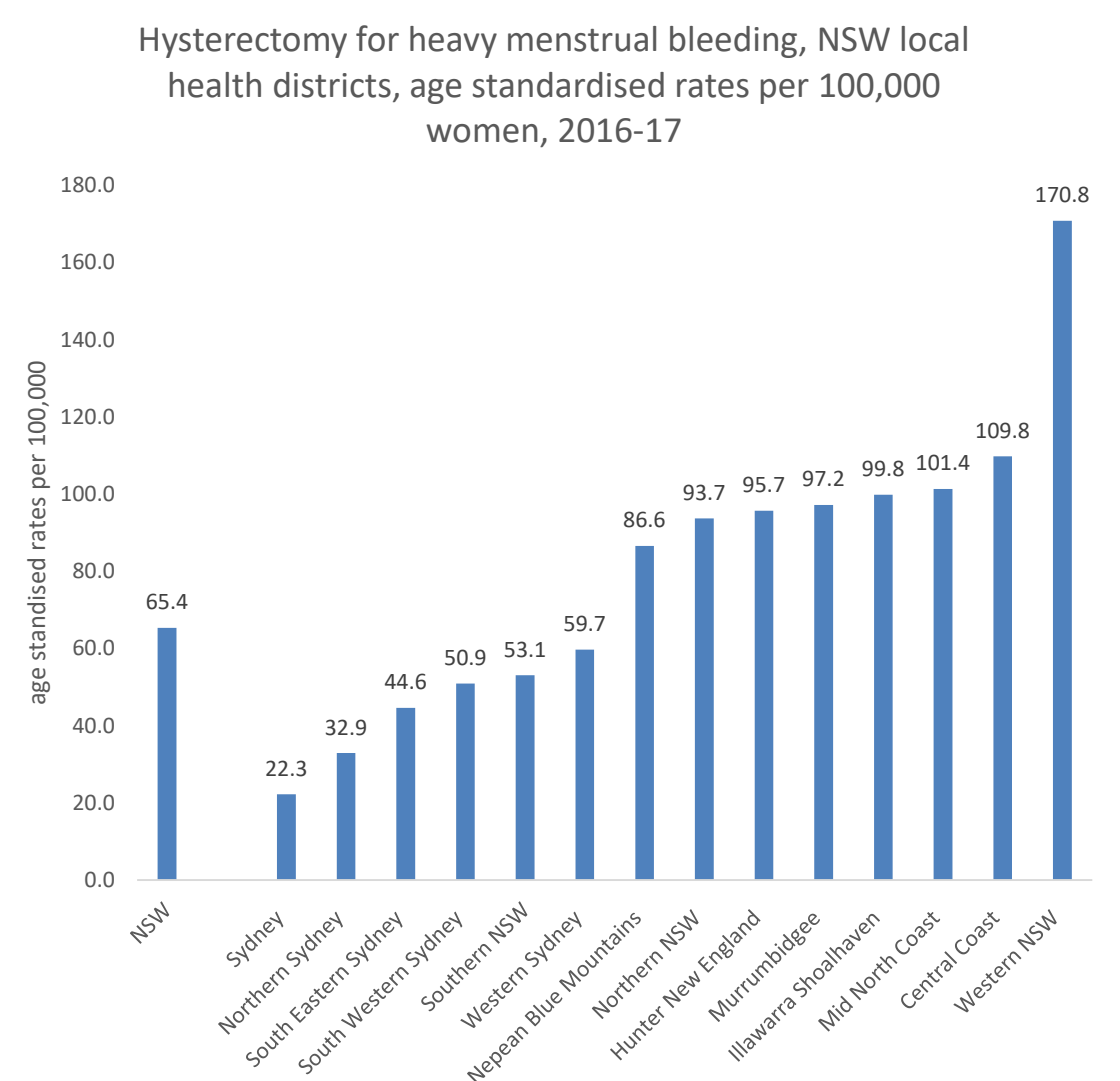
Abstract

Heavy menstrual bleeding (HMB) affects 25% of women of reproductive age with other symptoms. There are now a range of options to manage HMB including endometrial ablation, use of an intrauterine system but hysterectomy rates in Australia remain high and show high variation (1).

Methods

De-identified patient data were drawn from the NSW Ministry of Health's administrative data set. Hysterectomies were identified using ACHI codes 90448-00, 35653-00, 90448-01, 35653-01, 35664-00; 35667-00; 90448-02; 35653-04; 35661-00; 35657-00; 35673-02; 35667-01; 35664-01; 90450-00; 90450-01; 35670-00. Patients with heavy menstrual bleeding were identified by the ICD10-AM codes procedure codes N92, N93.8, N93.9. Rates were standardised to the 2001 Australian population.

Results



Objectives

The Agency for Clinical Innovation sought to examine variation in hysterectomy rates for abnormal uterine bleeding in NSW.

Results

Between 2008/09 and 2016/17 rates of hysterectomy for HMB per 100,000 women changed from 70.5 to 65.3. For the 2016/17 year the age standardised rates of hysterectomy by indication of HMB demonstrated wide variation by local health district with a rate of 22.3 per 100,000 low in Sydney and a high of 170.8 in Western NSW representing a 7.7 fold variation.

Conclusion

Rates of hysterectomy for HMB exhibit significant variation across the state of NSW. This may reflect variation in patient choice, surgeon's operative skills and preference/choice. It also may indicate that women are not aware of, or may not be counselled about, the range of available non-surgical options.

References

1. Australian Commission of Safety and Quality in Healthcare. Heavy Menstrual Bleeding Clinical Care Standard 2017