

Retrospective audit of clinical care provided and patient outcomes for women referred to Gynaecology clinic with postmenopausal bleeding.

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Background: Women with postmenopausal bleeding (PMB) need efficient assessment for endometrial cancer.

Aims: Evaluate the performance of a regional hospital Gynaecology department in assessment of PMB.

Methods: 12 month (01/01/2018–31/12/2018) retrospective data collection from medical records, Imaging & Pathology databases. Women were included with bleeding >12 months from LMP. Evaluation included endometrial cancer risk factors, endometrial thickness (ET), & endometrial histopathology.

Results: 95 women were included. Median age was 59, mean BMI was 38.6. 64.2% of women had ≥2 risk factors for endometrial cancer, 9.5% had no risk factors. Median time from referral to review was 21 days. 66% of women had transvaginal measurement of endometrial thickness,

remaining were transabdominal. Only 44% of women were examined at outpatient clinic. 80% (76/95) of all women had an endometrial biopsy. Of these, only 29 had a Pipelle attempted, of which 72% were successful. 62.5% of women with a thin endometrium (≤4mm) had an endometrial biopsy. 96.7% of women with a thickened endometrium (>4mm) were biopsied.

Conclusion: This audit identified areas for improvement. The low rate of outpatient examination & Pipelle biopsy places increased demand on theatre, anaesthetic and staffing resources. Whilst most guidelines recommend endometrial biopsy in PMB with thickened endometrium, clinical reasoning is required to avoid missed pathology in women with a thin endometrium.

Number of women with ET >4mm biopsied

Pathology results of these biopsies:

	USS ET >4mm
Number biopsied	59
% (of women with ET >4mm)	96.7%

(ET >4mm biopsies)	Insufficient	Benign	Pre-malignant & Malignant
Number	8	39	12
% (of biopsied women with ET >4mm)	11.9%	66.1%	20.3%

Number of women with ET ≤4mm biopsied

Pathology results of these biopsies:

	USS ET ≤/4mm
Number biopsied	20
% (of women with ET ≤4mm)	62.5%

(ET ≤4mm biopsies)	Insufficient	Benign	Pre-malignant & Malignant
Number	4	12	3
% (of biopsied women with ET ≤4mm)	20%	60%	15%

Mode of endometrial biopsy: N=76 (80% of total)

	Pipelle attempted in clinic	Successful	Unsuccessful (proceeded to HD&C)	HD&C as initial biopsy
Number	29	21	8	49
% (of total)	30.5%	22.1%	8.4%	51.6%

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