Hysterectomy

A hysterectomy is a surgery to remove a woman's uterus (also known as the womb). The uterus is where a baby grows when a woman is pregnant. During the surgery the whole uterus is usually removed. Your doctor may also remove your fallopian tubes and ovaries. After a hysterectomy, you no longer have menstrual periods and cannot become pregnant.

Q: Why would I need a hysterectomy?

A: Sometimes a hysterectomy may be medically necessary. But sometimes you can try medicines or other treatments first. Talk with your doctor about all of your treatment options.

You may need a hysterectomy if you have one of the following:

- Uterine fibroids. Uterine fibroids are noncancerous growths in the uterine wall. In some women, they can cause pain and long-term heavy bleeding. Uterine fibroids tend to shrink after menopause, so you may choose to wait. Your doctor may also try other procedures, like myomectomy or endometrial ablation, before a hysterectomy.
- **Heavy or unusual vaginal bleeding.** Changes in hormone levels, infection, cancer, or fibroids can cause heavy, prolonged bleeding. Hormonal birth control may help to lighten heavy bleeding, correct irregular bleeding, and relieve pain.
- **Uterine prolapse.** This is when the uterus slips from its usual place down into the vagina. This is more common in women who have had several vaginal births, but it can also happen after menopause or because of obesity. You can

- try Kegel exercises (squeezing the pelvic floor muscles) to help restore tone to the muscle holding the uterus in place. Your doctor may also insert a pessary (rubber or plastic object) into your vagina to hold your uterus in place.
- Endometriosis. Endometriosis happens when the tissue that lines the uterus grows outside of the uterus on the ovaries. This can cause severe pain and bleeding between periods. Your doctor can prescribe medicine or do surgery to remove the scar tissue or growths without harming surrounding tissue.
- Adenomyosis. In this condition, the tissue that lines the uterus grows inside the walls of the uterus where it doesn't belong. The uterine walls thicken and cause severe pain and heavy bleeding. Hormonal birth control may help.
- Cancer (or precancer) of the uterus, ovary, cervix, or endometrium. Hysterectomy may be the best option if you have cancer in these organs.

Q: Will the hysterectomy cause me to enter menopause?

A: All women who have a hysterectomy will stop getting their period. Whether you will have other symptoms of menopause after a hysterectomy depends on whether your doctor removes your ovaries during the surgery.

If you keep your ovaries during the hysterectomy, you should not have other menopausal symptoms right away.



If both ovaries are removed during the hysterectomy, you will no longer have periods and you may have other menopausal symptoms right away. Because your hormone levels drop quickly without ovaries, your symptoms may be stronger than with natural menopause.

Q: What changes can I expect after a hysterectomy?

A: Hysterectomy is a major surgery, so recovery can take a few weeks. But for most women, the biggest change is a better quality of life. You should have relief from the symptoms that made the surgery necessary.

Other changes that you may experience after a hysterectomy include:

• **Menopause.** You will no longer have periods. If your ovaries are removed during the hysterectomy, you may have other menopause symptoms.

- **Change in sexual feelings.** Some women have vaginal dryness or less interest in sex after a hysterectomy, especially if the ovaries are removed.
- Increased risk for other health problems. If both ovaries are removed, this may put you at higher risk for certain conditions such as: bone loss, heart disease, and urinary incontinence (leaking of urine). Talk to your doctor about how to prevent these problems.
- **Sense of loss.** Some women may feel grief or depression over the loss of fertility or the change in their bodies. Talk to your doctor if you have symptoms of depression, including feelings of sadness, a loss of interest in food or things you once enjoyed, or less energy, that last longer than a few weeks after your surgery.

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For more information ...

about hysterectomy, call the OWH Helpline at 800-994-9662 or contact the following organizations:

Division of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion, CDC, HHS

800-323-4636 • www.cdc.gov/reproductivehealth/

National Cancer Institute (NCI), HHS

800-422-6237 • www.cancer.gov

American College of Obstetricians and Gynecologists (ACOG)

202-638-5577 • www.acog.org

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