

# Your Journey with Post-Menopausal Bleeding



For more information scan this QR code or go to [myhealth.alberta.ca/post-menopausal-bleeding-pathway](https://myhealth.alberta.ca/post-menopausal-bleeding-pathway)

Post-menopausal bleeding is when a person older than 40 years of age has new vaginal bleeding after one year of no bleeding.

You are the most important part of your healthcare team. This guide will help you to know what to expect as you work with your healthcare team to manage and treat your post-menopausal bleeding. If you have any questions along the way, please ask your healthcare team. Click on the page numbers in blue if you want more information about the step in your journey.

## Before your appointment (page 5)

- Write down how you feel, your questions, symptoms, and concerns.
- Symptoms you may have are new bleeding, spotting brown or pink discharge, bleeding after or during certain activities, bleeding after sex, and pain.



## Visit your healthcare provider (page 6)

- Consider bringing a family member or friend to support you.
- Share all of your symptoms and concerns. Your health includes physical, emotional, spiritual, financial, and social elements.
- In order to better manage your health condition, your healthcare provider needs to hear from you and understand who you are and what matters to you.



## Get your tests (page 7)

Your tests and assessments may include:

- Internal pelvic exam
- Urine test
- Pap test
- Internal ultrasound
- Blood tests
- Biopsy of your uterus



## Review your test results (page 8)

- You may find some of your test results on MyHealth Records or MyAHS Connect ([myhealth.alberta.ca/myhealthrecords](https://myhealth.alberta.ca/myhealthrecords)).
- Talk with your healthcare provider so you know what your test and assessment results mean and how they will help your team and you decide what to do next.



## Review your treatment & management options (page 9)

- There are many ways to help treat and manage post-menopausal bleeding.
- Talk with your healthcare team to determine what is best for you, such as:
  - Medication that can help reduce your bleeding and manage your pain
  - Hysteroscopy - This procedure can remove polyps or fibroids
  - Surgery if other treatments do not work



## Talk with your healthcare provider about a referral (page 10)

- Not all patients need a referral to see a specialist.
- A referral is determined based on your symptoms, test results, your history, and your age.



## Start your treatment & watch your symptoms (page 11)

- **Call 811 if you have any of the following symptoms:** soaking a high-protection pad, tampon, or menstrual cup every hour for more than 2 hours; passing clots larger than a loonie; feeling dizzy, weak, or feverish; having very bad abdominal pain.
- Any change in your menstrual pattern or amount of bleeding that affects your daily life should be checked by your healthcare team.
- If you have a change in symptoms or notice a new symptom, consider keeping a menstrual diary to track your symptoms.



## Keep taking care of yourself (page 12)

- Keep taking care of your overall health.
- Look for other healthy-lifestyle resources and supports.



Whole-person health (page 2)

### Important Tips:

Need a family doctor?  
[ahs.ca/findadoctor](https://ahs.ca/findadoctor)

Need health advice?  
Call Health Link at 811

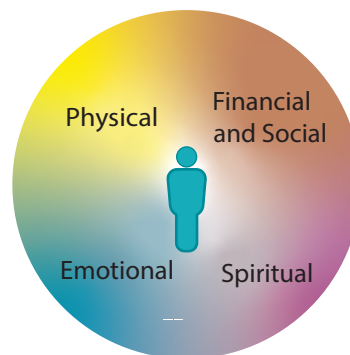
Need to find programs and services in your community?  
Call 211 or visit [ab.211.ca](https://ab.211.ca)

## Whole-person health

The whole-person health approach will help you and your healthcare team better manage your health condition. It is drawn from the teachings of the Medicine Wheel.

Whole-person health means thinking about all parts of your health and wellness: physical, financial and social, spiritual, and emotional. All of these parts are connected and influence each other. It's important to be aware of your personal needs in each part and to share that information with your healthcare team.

- **Physical:** your specific health conditions and how well your body works
- **Financial and Social:** your ability to meet your housing, transportation, food, and health needs, feeling supported to manage your daily life, and having meaningful relationships
- **Spiritual:** your beliefs, sense of connection, and purpose
- **Emotional:** how you think, feel, and cope with life events



**Whole-person health**

Whole-person health also reminds us that we are all connected and work together: you, your support systems, and your healthcare providers. Your healthcare providers could be your doctor, nurse practitioner, or a team that comes together with you to plan and organize your care.

Your healthcare provider needs to understand who you are and what matters to you. This helps to build trust. But it can be hard to know what to share or what to say. Try starting by asking yourself:

**“What are the things in my life that are important to me?”**

**“What are the things in my life that may be affecting my health and well-being?”**



Continued on next page.

Bringing forward what matters to you is important. Here are some examples of things you may want to talk about with your healthcare provider:



### **Physical**

“My symptoms are making it hard for me to do my job.”

“Because of my pain and how hard it is for me to move around, it’s hard to take care of myself.”

### **Financial and Social**

“I’m worried I won’t be able to get to all of my appointments.”

“I need my daughter with me as a translator.”

“I’m not sure how I will pay for my medicines this month.”

### **Emotional**

“I’m lonely and have no one to talk to.”

“I have a lot of stress and I’m not sure how to manage it.”

“Ever since my friend died, I’ve been struggling with my feelings.”

### **Spiritual**

“It’s important that I follow traditional healing practices.”

“How can I include my cultures’ foods and family recipes in my nutrition plan?”

“It’s important that my religious practice of fasting is respected and brought into my care.”

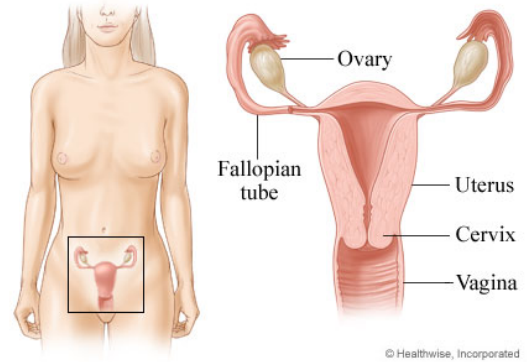
## What is post-menopausal bleeding?

Menopause is the point in your life when you have not had a menstrual period for 1 year.

Menopause usually happens around age 50. But everyone's body is different.

You may stop having periods in your mid-40s. Or keep having periods well into your 50s.

Once a person who is not taking hormone therapy enters menopause and their menstrual cycles have ended, any uterine bleeding is considered abnormal.



### What causes post-menopausal bleeding?

There can be many causes, including:

- Increased thinning of the tissue lining the vagina and uterus, caused by low hormone levels (atrophy)
- Cancer or precancerous changes (hyperplasia) of the uterine lining (endometrium)
- Polyps or fibroids (growths)
- Infection of the uterus
- Use of blood thinners or anticoagulants

## Before your appointment(s)

Everyone will have their own unique experiences with post-menopausal bleeding. How you move through your journey, the number of visits with your healthcare team, the steps you will take, and the order you take them in will depend on your individual needs and will be decided in partnership with your healthcare team. Always follow the specific recommendations from your healthcare team.

Here are a few tips to help you get ready for your appointment(s) with your healthcare provider:

- Consider using a symptom tracker to capture important information to share with your healthcare team about your symptoms.
- A symptom tracker can help you remember what symptom you're feeling, when it started, how often it happens, if the symptom changes, and what makes your symptoms better or worse.
- **Common symptoms you may have with post-menopausal bleeding are:**
  - **New bleeding**
  - **Spotting brown or pink discharge**
  - **Bleeding after or during certain activities**
  - **Bleeding after sex**
  - **Pain**
- Ask someone you trust to go with you to your appointment. They can help you ask questions, write down instructions, and remember explanations.



### Helpful tools and resources

- **Menstrual Diary:** [myhealth.alberta.ca/health/Pages/conditions.aspx?hwid=aa151402](https://myhealth.alberta.ca/health/Pages/conditions.aspx?hwid=aa151402)
- **Symptom tracker (HQCA):** [hqca.ca/wp-content/uploads/2022/03/HQCA-Symptom-Tracker-March-23-2022.pdf](https://hqca.ca/wp-content/uploads/2022/03/HQCA-Symptom-Tracker-March-23-2022.pdf)

To get the most out of your visit, plan to write notes during the visit or record the conversation using your phone's voice recorder or the Alberta Health Services My Care Conversations app at [ahs.ca/careapp](https://ahs.ca/careapp).



Your healthcare provider will review your history of symptoms and past menstrual information. They may ask how often, how long, and how much you have been bleeding. Having a completed symptom tracker will be helpful.

### What should I share with my healthcare provider?

- What impact the bleeding is having on things that are important to you, like your job, hobbies and interests, and relationships. It's important to talk about these things with your healthcare provider because they all play a role in your health and well-being.
- You are the most important part of your healthcare team.
- If you don't understand what your healthcare team is telling you, let them know right away. Be open and honest.

You might say:

**"This is new to me. Could you please explain it slowly, using language that is easier to understand?"**

**"It sounded like you said that I should... Did I understand that correctly?"**

**"Can you show me a picture or model to help me understand?"**



### Helpful tools and resources

- Making the most of your appointment: [myhealth.alberta.ca/health/pages/conditions.aspx?Hwid=hw226888](https://myhealth.alberta.ca/health/pages/conditions.aspx?Hwid=hw226888)
- Working with your healthcare team: [hqca.ca/for-patients-and-families/working-with-your-healthcare-team](https://hqca.ca/for-patients-and-families/working-with-your-healthcare-team)



You may also have tests and assessments to help find the cause of your symptoms and to rule out other health problems. These may include:

- **Internal pelvic exam**
  - This is done to check your pelvic organs.
  - You may feel pressure during the exam, but it shouldn't hurt.
  - You will get undressed from the waist down (underwear off).
  - You will get a sheet to cover yourself.
  - An instrument called a speculum is gently put in the vagina. The speculum makes it easier to see the vagina and cervix.
  - Your healthcare provider will feel with their hands the shape and position of the reproductive organs.
  - Your healthcare provider will look for any obvious lesions (cuts, sores, polyps, or tumors) and will examine the size and shape of the uterus.
- **Pap test**
  - This test is done during the internal pelvic exam looks for changes in the cells of the cervix. During the test, cells are gently removed from your cervix so they can be checked for any precancerous or cancerous changes.
- **Blood test(s)**
  - Certain blood tests may be ordered to understand your bleeding and your iron levels.
  - You may also have tests to assess for sexually transmitted infections (STI). Some of these can also be a urine test.
- **Pregnancy test**
  - This is done if there is a chance that you are pregnant. This could be a blood or a urine test.
- **Urine test**
  - Your urine will be tested to see what the urine looks like and what might be in it.
- **Ultrasound**
  - A pelvic ultrasound uses an external probe on your lower abdomen to provide images of your pelvic structures. A transvaginal ultrasound may be completed at the same time with your consent. In this ultrasound, a probe is inserted into the vagina to better look at the female reproductive organs.
- **A biopsy**
  - For this test, your doctor takes a tiny sample of tissue from your uterus.



## Review your test results

It is important to know what your test and assessment results are and what they mean. Take time to discuss your results with your healthcare provider. Medical terms can be hard to understand. And even common words like “positive” or “negative” might mean something different for medical tests. Ask your healthcare provider for explanations and examples to make sure you fully understand.

You might ask:

**“What does this mean for me?”**

**“Is there a current concern? If so, what is it?”**



### Helpful tools and resources

You may find some of your results and health information using secure online tools:

#### **MyHealth Records**

See your lab results, immunizations, and some other results with a MyHealth Records account. Sign up at [myhealth.alberta.ca/myhealthrecords](https://myhealth.alberta.ca/myhealthrecords).

#### **MyAHS Connect**

See your health information, manage your Alberta Health Services appointments, and interact directly with some members of your healthcare team. Ask your healthcare provider how to access your MyAHS Connect account. Learn more at [ahs.ca/myahsconnect](https://ahs.ca/myahsconnect).





## Review your treatment & management options

Every individual will require their own specific treatment and management plan. Your treatment choices may depend on your age, and the cause of your bleeding. Always follow the specific recommendations from your healthcare team.

### Bleeding and pain management

- Your healthcare provider may recommend over-the-counter medicine to reduce your bleeding and manage your pain, such as non-steroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Advil, Motrin).
- Depending on your pain level and your medical needs, your healthcare provider may also recommend other medications to help you manage your pain.

### Hormone therapy

- This can include many different options and requires discussion with your healthcare team to determine what will be best for you.

### Hysteroscopy

- This procedure allows a surgeon to look inside of your uterus and help diagnose and treat abnormal uterine bleeding. A thin, lighted tube is inserted into your vagina to look at your cervix and inside of your uterus. This procedure can also help with treatment by removing polyps or fibroids.

### Surgery

- Not everyone will need surgery. It may be done when other treatments don't work. It may include a hysterectomy (a procedure to remove your uterus).

Asking the following questions can help you make an informed decision about your different treatment options and decide which one(s) will work best for you:



**"What are the advantages and disadvantages of each treatment option?"**

**"Can I use any of these treatment options together?"**

**"How will this treatment make me feel? Will it have other effects (side effects)?"**

**"What results can I expect?"**



## Helpful tools and resources

- For more information on these management and treatment options: [gynqi.com/for-patients/](https://gynqi.com/for-patients/)
- Working with your healthcare team: & questions to ask about your treatment options: [hqca.ca/for-patients-and-families/working-with-your-healthcare-team/](https://hqca.ca/for-patients-and-families/working-with-your-healthcare-team/)



## Talk with your healthcare provider about a referral

- Not all patients with post-menopausal bleeding need a referral. Depending on your symptoms, your history, and your test results, you may need a referral to a gynecologist.
- A gynecologist is a doctor who specializes in the vulva, vagina, uterus, and ovaries.
- You should hear about the progress of the referral to your gynecologist within 3 months.
- Your gynecologist will assess you and your condition and recommend what treatment is best for you and your needs.



### Helpful tools and resources

To learn about how to prepare for your specialist appointment, visit [ahs.ca/qure](https://ahs.ca/qure).



## Start your treatment & watch your symptoms

As you try different treatment options, remember that if something doesn't work the way you thought it would, think about other options and connect with your healthcare provider to find what will work for you.

Remember:

- **If you are soaking a high-protection product (pad/tampon/menstrual cup) every hour for more than 2 hours, call 811.**
- If you are feeling dizzy, weak, feverish, or having severe abdominal pain, talk with your healthcare team.
- Any change in your bleeding pattern or amount of bleeding that affects your daily life should be checked by your healthcare team.

Watching your symptoms is important. Call your healthcare provider or Health Link at 811 if you have any concerns. You might feel like you don't want to bother your healthcare team, but no detail is too small to share. If it matters to you, it will matter to your healthcare team.

You can clarify with your healthcare team what to expect in terms of follow-up communication. Connect with your healthcare team whenever you:

- Have questions
- Notice your symptoms getting worse
- Have problems with your medicine
- Haven't gotten test results or heard back about an appointment in the time you had agreed to



### Helpful tools and resources

If you can't reach your healthcare provider and need health advice or information, call Health Link anytime, day or night, by dialling **811**.



There are many different things that can impact your health and wellness. It is important to be able to work with your healthcare team to decide what is best for you, in your life, given your own unique circumstances as you manage your post-menopausal bleeding.

Remember, you don't need to do everything all at once. Take realistic and manageable steps in your health and wellness. Consider why making a change may benefit you and the things that matter to you.



### Helpful tools and resources

#### **Find resources and services in your community:**

211 helps Albertans find the right resource or service for whatever issue they need help with, at the right time. 211 is available anytime, day or night, by phone, text, and online chat. It is confidential and available in over 170 languages over the phone. To contact 211:

- Call 211
- Text INFO to 211
- Visit [ab.211.ca](http://ab.211.ca)

**Workshops, classes, and services from the Alberta Healthy Living Program** can help you to improve your health and quality of life with a chronic condition: [ahs.ca/ahlp](http://ahs.ca/ahlp)

**Chronic Disease Management support:** [ahs.ca/cdm](http://ahs.ca/cdm)

**Health Information & Tools:** [myhealth.alberta.ca/Pages/HealthInfoToolsDefault.aspx](http://myhealth.alberta.ca/Pages/HealthInfoToolsDefault.aspx)

## Resources

There's lots of information out there, and it can be confusing to know what information is accurate and true. Here is a great resource that may be helpful for you.

- Gynecology Collaboration: [gynqi.com/for-patients/](http://gynqi.com/for-patients/)

### Get help now:

- Emergency: Call 911
- Health Link: Call 811

### Mental health, addiction, and crisis support:

- [Addiction Helpline](http://Addiction Helpline): 1-866-332-2322
- [Mental Health Helpline](http://Mental Health Helpline): 1-877-303-2642
- Crisis Text Line: Text CONNECT to 741741
- Crisis Services Canada: 1-833-456-4566, or visit [talksuicide.ca](http://talksuicide.ca)

### Helpful tip

If you can't print this resource at home, ask a family member, friend, or your healthcare provider if they can print it for you. You can also use a computer and printer at your local library.

### Community and social supports:

- Alberta 211: 211, or visit [ab.211.ca](http://ab.211.ca)
- Family Violence Info Line: 310-1818, or visit [alberta.ca/family-violence-find-supports.aspx](http://alberta.ca/family-violence-find-supports.aspx)
- Income Support: 1-866-644-5135, or visit [alberta.ca/income-support.aspx](http://alberta.ca/income-support.aspx)

### Alberta Health Services programs:

- Home Care: [ahs.ca/homecare](http://ahs.ca/homecare)
- Find a Dietitian: [ahs.ca/nutrition](http://ahs.ca/nutrition)
- Spiritual Care Services: [ahs.ca/spiritualcare](http://ahs.ca/spiritualcare)

### Primary care (family doctors):

- Find a doctor: [ahs.ca/findadoctor](http://ahs.ca/findadoctor)
- Virtual care guide: [ahs.ca/virtualhealth](http://ahs.ca/virtualhealth)

### Patient concerns and feedback:

- Office of Alberta Health Advocates: [alberta.ca/office-of-alberta-health-advocates.aspx](http://alberta.ca/office-of-alberta-health-advocates.aspx)
- Alberta Health Services Patient Relations: 1-855-550-2555, or visit [ahs.ca/patientfeedback](http://ahs.ca/patientfeedback)

## Important phone numbers

Name or clinic name:

Phone number:

Name or clinic name:

Phone number:

Name or clinic name:

Phone number:

## Notes

Use this space to take notes.

### **About this Pathway**

The AHS Provincial Pathways Unit co- developed this patient pathway in partnership with patient and family advisors, primary and specialty care providers in Alberta. It is current as of **October 2023**.

### **Authors & Conflict of Interest Declaration**

This pathway was reviewed and revised by a multi-disciplinary co-design team including gynecologists and primary care providers from across Alberta.

### **Pathway Review Process**

Primary care pathways undergo scheduled review every two years, or earlier if there is a clinically significant change in knowledge or practice. The next scheduled review is **October 2025**. However, we welcome feedback at any time. Please email comments to [AlbertaPathways@ahs.ca](mailto:AlbertaPathways@ahs.ca).

### **Copyright Information**

This work is licensed under a Creative Commons Attribution-Non-commercial-Share Alike 4.0 International licence. You are free to copy, distribute, and adapt the work for non-commercial purposes, as long as you attribute the work to Alberta Health Services and abide by the other licence terms. If you alter, transform, or build upon this work, you may distribute the resulting work only under the same, similar, or compatible licence. The licence does not apply to content for which the Alberta Health Services is not the copyright owner.

### **Disclaimer**

This pathway represents evidence-based best practice but does not override the individual responsibility of health care professionals to make decisions appropriate to their patients using their own clinical judgment given their patients' specific clinical conditions, in consultation with patients/alternate decision makers. The pathway is not a substitute for clinical judgment or advice of a qualified health care professional. It is expected that all users will seek advice of other appropriately qualified and regulated health care providers with any issues transcending their specific knowledge, scope of regulated practice or professional competence.