Tower Bridge Hospital London

Tower Bridge Hospital London
97–99 Whitechapel Road, London E1 1DT
020 7916 0029 · Open 7 days, 9am–7pm
towerbridgehospital.co.uk

PATIENT INFORMATION · WOMEN'S HEALTH

Heavy periods
you do not have to put up with them

Heavy menstrual bleeding is defined by its effect on you, not by any measurement. If your periods are interfering with work, exercise, sleep or confidence, that is sufficient reason to treat them — and there are several effective options, most of which do not involve surgery.

Arrange assessment promptly if you have

- **bleeding between periods, or after sex**
- **any bleeding after the menopause**
- bleeding with **pelvic pain, bloating or a feeling of fullness** that persists
- **dizziness, breathlessness or palpitations** — these suggest significant anaemia
- flooding that soaks through **clothing or bedding**, or passing clots larger than a 50p piece
- a sudden change in a pattern that had been stable for years

Bleeding between periods and after sex needs examining and usually a smear check and ultrasound — not because it is likely to be sinister, but because the causes that matter are treatable when found early. In an emergency call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

What counts as heavy

- changing pads or tampons every hour or two, or needing double protection
- bleeding through to clothes or bedding
- passing clots larger than a 50p piece
- periods lasting more than seven days
- planning your life around your period — avoiding work, travel, exercise or social plans

Get your iron checked

Heavy periods are the commonest cause of iron deficiency in women, and iron can be low long before you are formally anaemic. Low iron causes exhaustion, breathlessness on stairs, poor concentration, hair shedding and restless legs — symptoms routinely attributed to a busy life. Ask for **ferritin as well as a full blood count**; a normal haemoglobin does not exclude iron deficiency.

Common causes

- **No structural cause at all** in around half of cases — this is a real diagnosis, not a failure to find one
- **Fibroids** — benign growths in the womb, very common
- **Adenomyosis** — womb lining growing into the muscle, causing heavy and painful periods
- **Polyps** in the womb or cervix
- **Hormonal changes**, particularly in perimenopause
- **Bleeding disorders** — worth considering if you have bled heavily since your very first period, or bruise and bleed easily
- Thyroid problems, and some medicines including anticoagulants

Treatment, roughly in order

First line

hormonal coil (LNG-IUS)

No hormones

tranexamic acid, anti-inflammatories

Also

combined pill, progestogens, procedures

- **The hormonal coil** is the most effective medical treatment and is recommended first line. It reduces bleeding substantially, often stopping periods altogether, lasts several years, and is reversible. It is a small procedure in clinic.
- **Tranexamic acid**, taken only on heavy days, reduces blood loss by around a third to a half. It is not hormonal and does not affect fertility.
- **Anti-inflammatories** such as mefenamic acid or naproxen reduce both bleeding and period pain, taken during the period.
- **The combined pill** lightens and regulates periods and can be taken back to back to skip them.
- **Endometrial ablation** or, rarely, surgery for fibroids or hysterectomy, where medical treatment has not worked and family is complete.
- **Iron replacement** alongside whatever else — treating the bleeding without replacing the iron leaves you exhausted for months.

What assessment involves

A history and examination, blood tests including full blood count and ferritin, and usually a pelvic ultrasound to look for fibroids, polyps or adenomyosis. Depending on findings, a hysteroscopy — a camera look inside the womb — may follow. Most of this can be done in a single visit.

> **Book an appointment if** your periods are affecting your life, you are exhausted and suspect low iron, you want a hormonal coil fitted, or you have bleeding between periods. We offer women's health consultations, blood tests and pelvic ultrasound on site seven days a week, and arrange coil fitting through our CQC-registered partners.

Where to get help

Tower Bridge Hospital London
97–99 Whitechapel Road, London E1 1DT

020 7916 0029

WhatsApp **07903 284 189**
info@mhwclinic.co.uk
Open 7 days, 9am–7pm

In an emergency
Call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

When we are closed and it is not an emergency
Call NHS 111 or visit 111.nhs.uk.

Related: **Women's health** · **Ultrasound** · **Blood tests** · **All patient leaflets**

Written and reviewed by Dr H Bolat, GP & Clinical Director **Review date: 26 July 2026** **Next review due: July 2028**

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This leaflet is based on current NHS and NICE guidance on heavy menstrual bleeding. It is general information and does not replace advice from a clinician who has assessed you. If your symptoms change or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.