Northampton General Hospital NHS
NHS Trust

Endometrial ablation with LiNA Librata performed by a nurse consultant

Gillian Smith, Nurse Consultant, Gynecology, Northampton General Hospital NHS trust

INTRODUCTION

Heavy menstrual bleeding (HMB) is a condition that impacts the quality of life of many women of reproductive age. The LiNA Librata is a cordless battery-operated thermal ablation system indicated for the treatment of HMB. The device ablates the endometrial lining utilizing a silicone balloon which fills up with heated glycerine and adapts to the uterine cavity size and shape. The device is fully automated and performs a perforation pressure test before initiating treatment. During treatment the intra-uterine pressure is constantly measured and excess pressure or loss of pressure will automatically abort the procedure. The thermal treatment lasts for approximately two minutes. Once the treatment is complete, the glycerine is withdrawn back into its reservoir and the balloon deflates. The LiNA Librata will then indicate that the treatment is finalized.

OBJECTIVE

To evaluate the effectiveness of the LiNA Librata endometrial ablation device and the feasibility of appropriately trained nurse hysteroscopists performing the procedure.

METHODS

- Retrospective evaluation of 27 patients who underwent endometrial ablation with LiNA Librata. All patients were treated by a qualified nurse hysteroscopist with training in endometrial ablation. The procedure was performed in accordance with local and national clinical guidelines.
- All patients suffered from menorrhagia for benign reasons and were unresponsive to medical therapy. Endometrial thinning was not performed.
- The patients were treated in an outpatient setting or under general anaesthesia in operating theatres. In the outpatient setting a pre-procedure regime of diclofenac PR 100mg, Paracetamol 1g oral, Diazepam 5mg oral and Cyclizine 50mg oral was administered one hour preoperatively. If cervical dilation was required a cervical block with 6 ml of Prilocaine 3% with Felypressin was performed.
- The patients were followed up via telephone consultation 3 months post-ablation.

RESULTS

- The median age of the study group was 46 years (range 38 - 55). 26/27 procedures were completed. In 1 case the procedure was aborted by the device.
- 22 procedures were performed in outpatients, while 4 were performed in operating theatres (Figure 1). All patients in the outpatient group tolerated the procedure with none being abandoned due to discomfort.

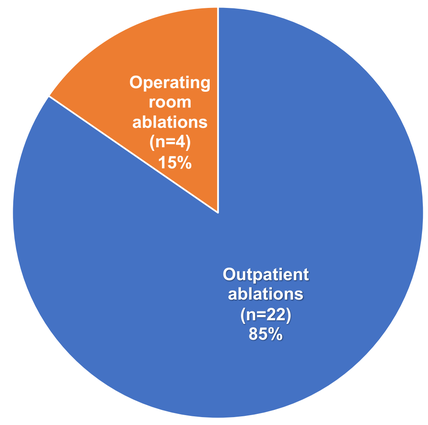

Figure 1: Outpatient vs operating room procedures

- 18 patients received local anaesthetic and cervical dilation up to 6 mm. 4 patients did not require dilation nor local anaesthesia. There were no adverse patient consequences due to the procedures.

Table 1: Procedural data

Procedural data	n=26
Outpatient procedures	22
Operating room procedures	4
General anaesthesia	4
Local anaesthesia	18
No anaesthesia	4
No dilation	4

- Follow up data are available for 15 patients. All patients reported reduced menstrual blood loss (15/15), including 47% with amenorrhoea (7/15). No patients required further surgical treatment.

Table 2: Follow up data

	3 months (n=15)
Patients with reduced bleeding	100% (15/15)
Patients with amenorrhea	47% (7/15)

- The outcomes of this study are consistent with results from previous investigations evaluating LiNA Librata. Fortin (2018) reported a reduction in bleeding in 100% of patients (n=18/18) and an amenorrhea rate of 56% (n=10/18). In a study by Guyer (2018), 87% of patients (n=45/52) experienced a reduction in bleeding and 33% (n=17/52) reported amenorrhea.

CONCLUSION

The LiNA Librata endometrial ablation device is an effective treatment for heavy menstrual bleeding and can successfully be performed by appropriately trained nurse hysteroscopists.

REFERENCES
- Fortin, Performance and effectiveness of the Librata endometrial ablation system Oral presentation at ESGE 2018, ES27-0131 – Hysteroscopy: Outpatient | Office Hysteroscopy; Oral presentation at AAGL 2018, Open communication 6: New instruments
- Guyer, Clinical evaluation of the Librata endometrial ablation device in an outpatient setting Oral presentation ESGE 2018 ES27-0129 –Miscellaneous | Heavy Menstrual Bleeding