Women's Health Update

Ask Your Doctor About Heavy Monthly Periods

by Dr. Andrea Lukes

(NAPSA)—It isn't easy for many women to discuss their periods, including the 22 million women in the United States who suffer from cyclic heavy menstrual bleeding (HMB)—periods that may impact or limit their daily activities, especially while they are bleeding. HMB can cause anemia and lack of energy.

Only 11 percent of women who



think they have heavy periods will discuss treatments with their doctor. Many will think their bleeding is normal and that nothing can be done. Unfortunately, those women may suffer in silence and are not

aware that there are effective methods for treating heavy periods.

Dr. Andrea Lukes, an Ob-Gyn at Carolina Women's Research and Wellness Center in Durham, N.C., answers a few questions to help you learn more about cyclic HMB and start a conversation with your doctor about treatment options.

What Is HMB?

For most of us, it makes sense to think about HMB in terms of its signs and symptoms. According to mayoclinic.com, women with HMB may:

- Experience heavy menstrual flow that interferes with regular lifestyle.
- Feel tired or short of breath—the symptoms of anemia.
- Need to change sanitary protection during the night.
- •Use double sanitary protection to control menstrual flow.
- Soak through one or more tampons or pads per hour.
- Have menstrual flow that includes large blood clots.

What Is It Like Living With HMB?

The condition can have a profound impact on women; it affects social, leisure and physical activities including household duties and family responsibilities, exercising, work and sexual intimacy. Time spent watching children's sporting events may be cut short because of frequent bathroom breaks to change pads or tampons. Women wake up at night because they've soaked through their protection. Individuals can become anemic, feel tired and sluggish and want to stay in bed.

What Causes HMB?

In women with normal menstruation, the body's healthy bloodclotting process helps to manage the rate of blood flow. In contrast, women with HMB experience a breakdown of blood clots, or fibrinolysis, which occurs more rapidly than normal, causing excessive bleeding during menstruation.

In some cases, the root cause of HMB is not determined or known. However, a number of conditions may result in heavy menstrual flow, including a hormonal imbalance, ovary dysfunction, uterine fibroids and polyps, underlying bleeding disorders and other complications.

What Are Treatment Options?

Historically, women with HMB have had limited options for treating the condition: nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen; hormonal contraceptives, including birth control pills; and hysterectomy and other surgeries.

Recently, the FDA approved Lysteda" (tranexamic acid) tablets, a first-line, nonhormonal prescription medication specifically indicated for cyclic HMB. In clinical studies, Lysteda significantly reduced menstrual blood loss (MBL) over three and six cycles of use compared with placebo. The tablets are taken only during the menstrual period for up to five days, and have been shown to work within the first cycle of use.

For more information about HMB, talk to your doctor and visit www.lysteda.com.

Note to Editors: Important Safety Information

Don't take Lysteda if you have or ever had a blood clot, been told you're at risk for a blood clot, or are allergic to Lysteda or tranexamic acid. Lysteda can cause serious side effects. The risk of blood clots may increase if you take Lysteda with hormonal contraceptives or blood-clotting or some leukemia medicines. Other serious side effects are eye changes and allergic reactions. Stop taking Lysteda if you have eye problems, shortness of breath or your throat feels tight, and get medical help right away. Most-common side effects include headaches; sinus and nasal problems; back, abdominal, muscle or joint pain; anemia and fatigue.