


Case 3 – Mrs SC

- 66 years old, menopausal
 - History of Post coital bleeding – lasted for 3 days
 - Then intermittently pinkish/ brownish vaginal discharge for another week
 - USS arranged by GP
 - Adenomyosis
 - 3.4mm endometrial thickness with small fluid in the cavity
 - Normal ovaries
 - Smear – UTD and normal
 - No significant medical history
 - 2 prev CS
- 



Pipelle....

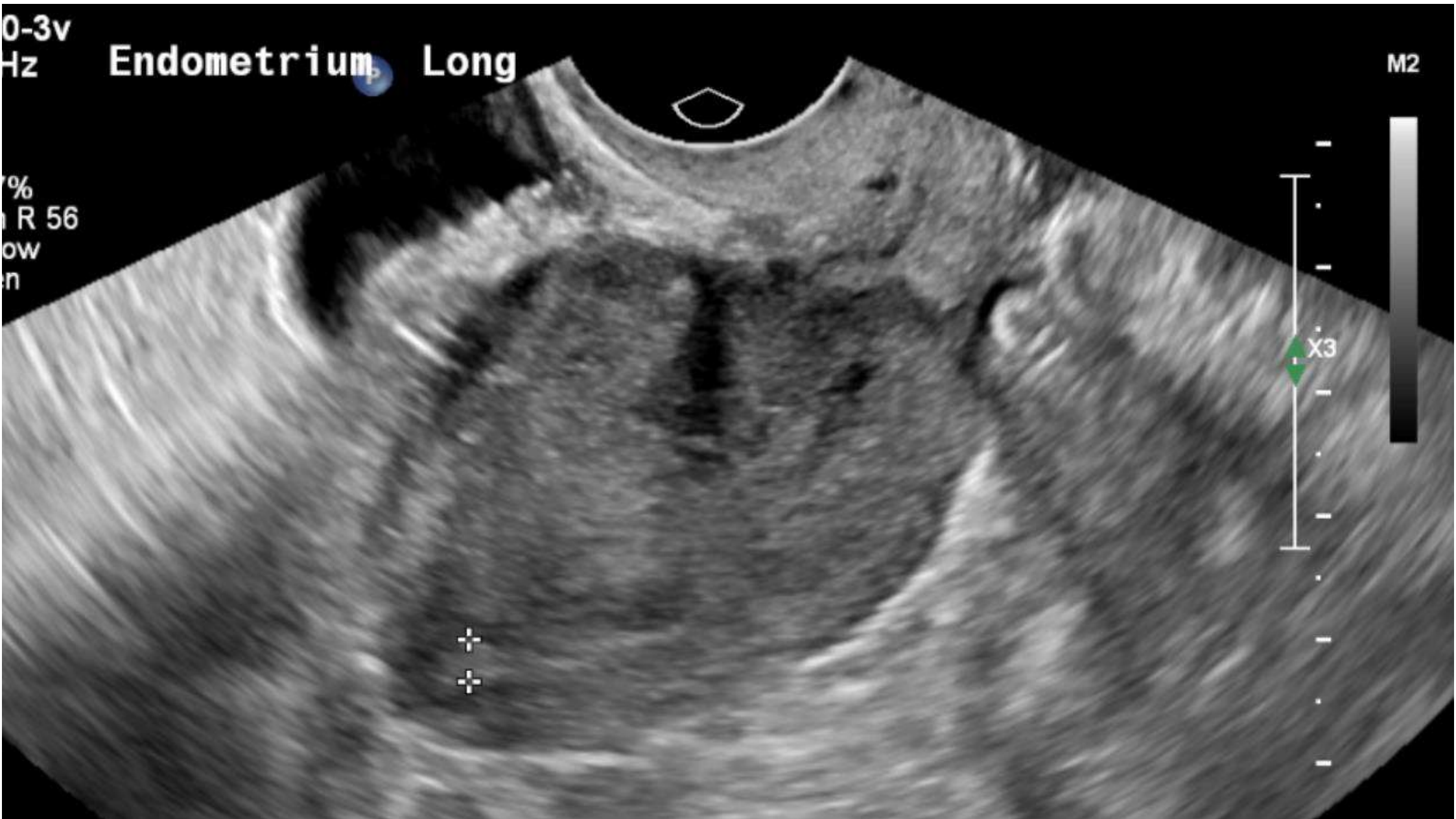
Fragments of adenocarcinoma

0-3v
Hz

Endometrium Long

M2

%
R 56
ow
n



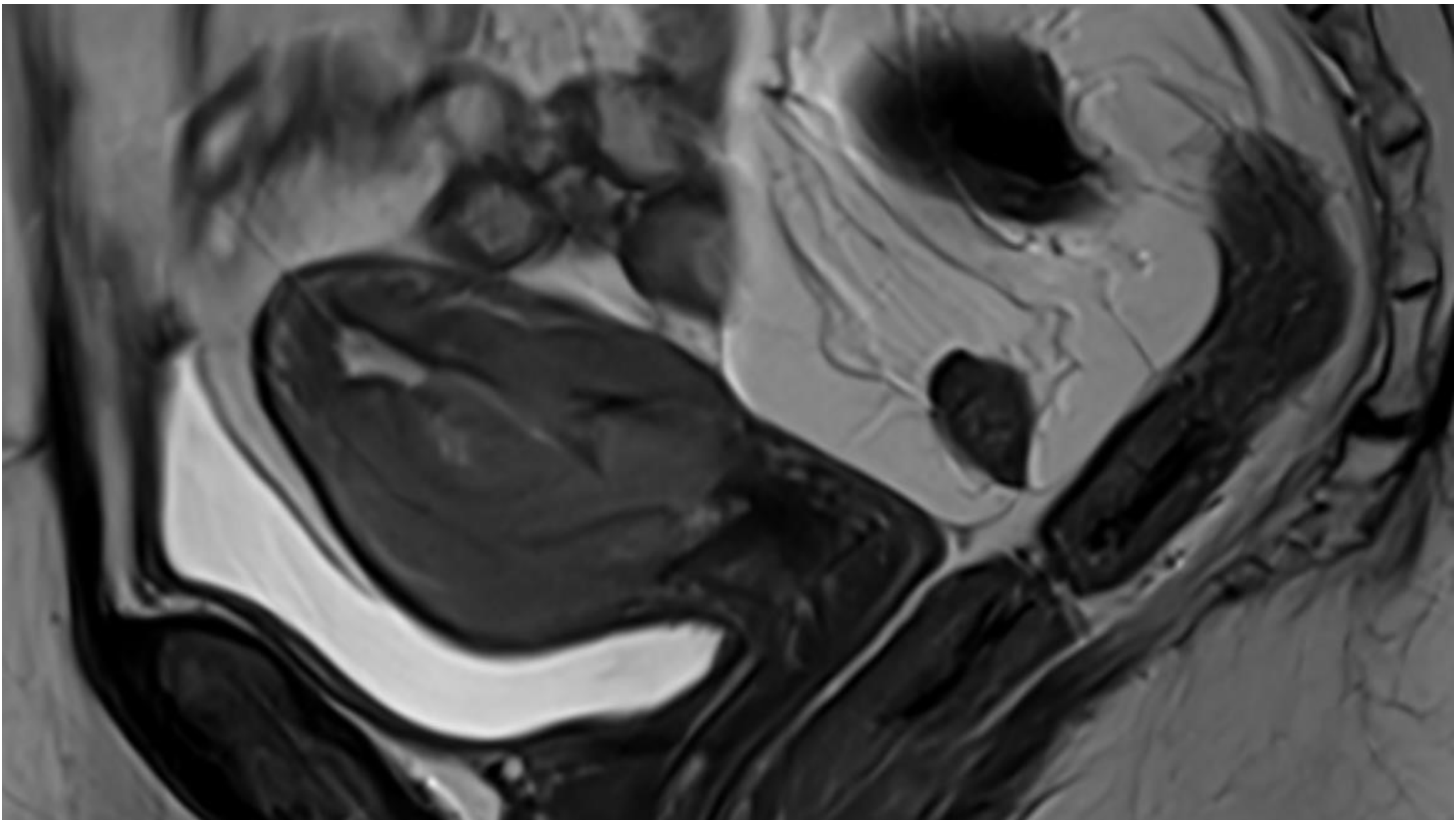
RS

2D

54%
Dyn R 56
P Low
Gen




X3

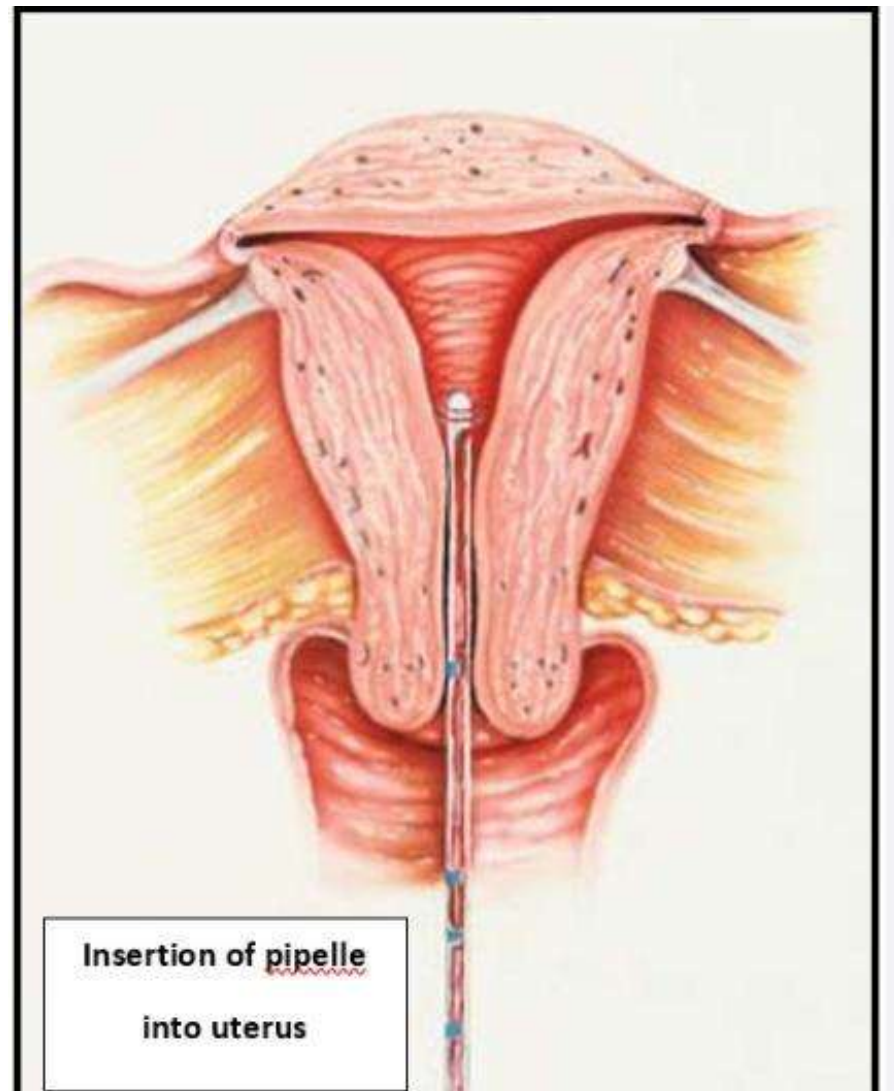




TAH BSO washings and omental biopsy and nodal debulking

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- Histology
 - Endometroid adenocarcinoma
 - Grade 2
 - FIGO stage 3c

Pipelle – endometrial sampling



Indications for Pipelle

- Post menopausal bleeding
- Recurrent post coital bleeding
- AUB
- Hb <80
- Failed medical management > 3/12
- IMB >3/12
- Endometrial cells in cervical smears with abnormal symptoms

Before Pipelle

BIMANUAL EXAM
– position of the
uterus

CHECK FOR LMP

CHECK FOR RISK
OF PREGNANCY

IF IN DOUBT

- DO A URINE
PREGNANCY TEST!!!!

Pipelle procedure

<https://youtu.be/at-CfWUiClg>

THE RESULTS

- PRE/PERI MENOPAUSAL:
 - Insufficient
 - Normal
 - Fragments of polyp
 - Endometrial hyperplasia
 - WITHOUT atypia (3-8 % develop uterine cancer)
 - WITH ATYPIA (up to 30% develop uterine cancer or coincide with early uterine cancer)

- **Post Menopausal**

- INACTIVE endometrium
- PROLIFERATIVE ENDOMETRIUM – Refer to Gynae CMDHB
- DISORDERED PROLIFERATIVE ENDOMETRIUM – Refer to Gynae CMDHB