

FAQs

Dilation and Curettage (D&C)

Frequently Asked Questions

What is dilation and curettage (D&C)?

Dilation and curettage (D&C) is a surgical procedure in which the cervix is opened (dilated) and a thin instrument is inserted into the uterus. This instrument is used to remove tissue from the inside of the uterus (curettage).

Why is a D&C done?

D&C is used to diagnose and treat many conditions that affect the uterus, such as abnormal bleeding. A sample of tissue from inside the uterus can be viewed under a microscope to tell whether any cells are abnormal.

A D&C may also be used to remove pregnancy tissue during a first-trimester abortion or during a miscarriage.

A D&C may be done with other procedures, such as hysteroscopy, in which a thin, lighted telescope is used to view the inside of the uterus.

Where is a D&C done?

A D&C can be done in a health care professional's office, a surgery center, or a hospital.

What preparation is needed for a D&C?

Your health care professional may want to start dilating (opening) your cervix before surgery using laminaria. This is a slender rod of natural or synthetic material that is

inserted into the cervix. It is left in place for several hours. The rod absorbs fluid from the cervix and expands. This causes the cervix to open.

Medication may also be used to soften the cervix, making it easier to dilate. You may also receive some type of anesthesia before or during your D&C.

What happens during a D&C?

During the procedure, you will lie on your back and your legs are placed in stirrups. A speculum is inserted into your vagina. The cervix is held in place with a special instrument.

If your cervix needs to be dilated (opened), this is done by inserting a series of rods through the cervical opening. Each is slightly larger than the last one. Usually only a small amount of dilation is needed (less than one half inch in diameter).

Tissue lining the uterus will be removed, either with an instrument called a curette or with a suction or vacuum pump. When a suction or vacuum pump is used, the procedure may be called "vacuum aspiration" or "suction curettage."

In most cases, the tissue is sent to a lab for examination.

What are the risks of D&C?

Complications are rare. When they do occur, they include bleeding, infection, or perforation of the uterus (when the tip of an instrument passes through the wall of the uterus). Problems related to the anesthesia used can also occur.

In rare cases, after a D&C has been performed for miscarriage or abortion, bands of scar tissue called adhesions may form inside the uterus. These adhesions may cause infertility and amenorrhea. This is called Asherman syndrome. Asherman syndrome can often be treated successfully with surgery. Call your health care professional if your period has not returned within 3 months after a D&C.

What should I expect after a D&C?

After the procedure, you will probably be able to go home within a few hours. You will need someone to take you home. You should be able to resume most of your regular

activities in 1 or 2 days. Pain after a D&C is usually mild. You may have spotting or

bleeding for several weeks.

A new lining will build up in the uterus after a D&C. Your next menstrual period may not

occur at the regular time. It may be early or late.

Until your cervix returns to its normal size, bacteria from the vagina can enter the uterus

and cause infection. It's important not to put anything into your vagina after the

procedure. Ask your health care professional when you can have sex or use tampons

again.

Your health care professional should follow up with you soon after your D&C to discuss

the results. More treatment may be needed in some cases.

When should I call a health care professional after a D&C?

Contact your health care professional if you have any of the following:

• Heavy bleeding from the vagina (soaking two maxi-pads per hour for 2 hours in a

row)

• Fever (temperature above 100.4 °F) or chills

Severe pain in the abdomen or back that does not get better with pain medication

Foul-smelling discharge from the vagina

Flu-like symptoms lasting more than 24 hours

Fainting

Glossary

Adhesions: Scars that can make tissue surfaces stick together.

Amenorrhea: The absence of menstrual periods in women of reproductive age.

Anesthesia: Relief of pain by loss of sensation.

Cells: The smallest units of a structure in the body. Cells are the building blocks for all

parts of the body.

Cervix: The lower, narrow end of the uterus at the top of the vagina.

Hysteroscopy: A procedure in which a lighted telescope is inserted into the uterus through the cervix to view the inside of the uterus or perform surgery.

Laminaria: Slender rods made of natural or synthetic material that expand when they absorb water. Laminaria are inserted into the opening of the cervix to widen it.

Menstrual Period: The monthly shedding of blood and tissue from the uterus.

Miscarriage: Loss of a pregnancy that is in the uterus.

Speculum: An instrument used to hold open the walls of the vagina.

Uterus: A muscular organ in the female pelvis. During pregnancy, this organ holds and nourishes the fetus.

If you have further questions, contact your ob-gyn.

Don't have an ob-gyn? Learn how to find a doctor near you.

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