

Abnormal Vaginal Bleeding

Abnormal vaginal bleeding occurs between menstrual periods, after sex, or after menopause. Menstrual periods that are heavier or last longer than usual or last more than seven days also are considered abnormal.

Your doctor will likely perform a physical and pelvic exam and may test your blood, hormone levels and thyroid function to determine if you are pregnant or infected with a sexually transmitted disease. Imaging tests such as pelvic ultrasound, transvaginal ultrasound, ultrasound of the uterus, pelvic MRI, hysteroscopy or endometrial biopsy also may be used to help diagnose your condition. Treatment depends on the underlying cause and may include medication, uterine fibroid embolization, endometrial ablation or surgical intervention.



What is abnormal vaginal bleeding?

Normal vaginal bleeding, or menstruation (also called a period), is part of a woman's menstrual cycle. It typically occurs every 21 to 35 days and lasts from two to seven days. Abnormal vaginal bleeding is bleeding from the vagina that occurs:

- between periods (including spotting)
- after sex
- during menstruation, but is heavier than usual or that lasts longer than usual, or more than seven days
- after menopause.

Abnormal vaginal bleeding has various causes, including fibroids, endometrial polyps, an infection of the uterus, pregnancy, miscarriage, ectopic pregnancy, retained products of conception following pregnancy, or cancers of the uterus including endometrial and cervical cancers.

How is abnormal vaginal bleeding evaluated?

To determine the cause of abnormal bleeding, your physician will perform a physical exam, including a pelvic exam, and may perform one or more of the following:

- blood tests, including a blood clotting profile
- hormone tests
- tests for sexually transmitted diseases
- a pregnancy test
- thyroid function tests
- Ultrasound of the pelvis to evaluate the uterus, cervix, ovaries, fallopian tubes and bladder. *See the [Ultrasound Imaging of the Pelvis](https://www.radiologyinfo.org/en/info/pelvis) (<https://www.radiologyinfo.org/en/info/pelvis>) page for more information.*
- A transvaginal ultrasound, in which a small hand-held device is inserted into the vagina, produces pictures of the endometrium, or the lining of the uterine cavity, and the walls of the uterus, called the myometrium, as well as the ovaries.
- Sonohysterography, or ultrasound of the uterus, provides a more in-depth evaluation of the uterine cavity. In this minimally

invasive procedure, a saline solution is injected into the uterine cavity to help visualize and measure the endometrium and to look for polyps or a mass of tissue. This exam may also involve an injection of air to help determine if the fallopian tubes are open.

- Pelvic MRI is used after ultrasound to better visualize fibroids, cancer, or retained products of conception. *See the MRI of the Body (Chest, Abdomen, Pelvis)* (<https://www.radiologyinfo.org/en/info/bodymr>) page for more information.
- Hysteroscopy involves inserting into the uterus a narrow lighted tube with an optical instrument or viewing device on the end to allow the physician to look for fibroids, polyps or other abnormalities.
- Endometrial biopsy is used to remove and examine a small sample of tissue from the endometrium under a microscope to diagnose cancer or other causes of abnormal bleeding. The procedure, which may be performed as an office procedure alone or in conjunction with hysteroscopy, involves a suction or cutting device that removes a small piece of tissue from the uterus.

How is abnormal vaginal bleeding treated?

Treatment for abnormal vaginal bleeding depends on the underlying cause, and may include:

- medication
- birth control pills or hormone-releasing intrauterine devices.
- Uterine fibroid embolization (UFE) (<https://www.radiologyinfo.org/en/info/uterine-fibroid-treatment>) . In this minimally invasive procedure guided by an x-ray camera called a fluoroscope, tiny particles are injected through a catheter into uterine arteries that are delivering blood to fibroids, blocking blood flow and causing the fibroids to shrink.
- Endometrial ablation. Guided by a narrow lighted tube with a viewing device on the end (called a hysteroscope), the lining of the uterus is destroyed using a laser or other specialized instruments that produce heat, freezing, microwave energy or electrical currents.
- Myomectomy, the surgical removal of fibroids.
- Dilation and curettage (D&C). A procedure in which endometrial tissue is gently scraped or suctioned from the uterus.
- Hysterectomy. A surgical procedure in which the uterus is removed.

Which test, procedure or treatment is best for me?

- *Abnormal Uterine Bleeding* (<https://www.radiologyinfo.org/en/info/acs-abnormal-uterine-bleeding>)
- *Fibroids* (<https://www.radiologyinfo.org/en/info/acs-fibroids>)
- *First Trimester Vaginal Bleeding* (<https://www.radiologyinfo.org/en/info/acs-first-trimester-vaginal-bleeding>)
- *Postmenopausal Acute Pelvic Pain* (<https://www.radiologyinfo.org/en/info/acs-postmenopausal-acute-pelvic-pain>)
- *Postmenopausal Subacute or Chronic Pelvic Pain* (<https://www.radiologyinfo.org/en/info/acs-postmenopausal-pelvic-pain>)
- *Second and Third Trimester Vaginal Bleeding* (<https://www.radiologyinfo.org/en/info/acs-second-and-third-trimester-vaginal-bleeding>)

Disclaimer

This information is copied from the RadiologyInfo Web site (<http://www.radiologyinfo.org>) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at <http://www.radiologyinfo.org> to view or download the latest information.

Note: Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2025 Radiological Society of North America, Inc.