

# FIBROIDS

## What are fibroids?

Uterine fibroids are the most common, non-cancerous tumors in women of childbearing age. Uterine fibroids are tumors or lumps made of muscle cells that grow within the walls of the uterus. Fibroids grow as a single tumor or in clusters. A single fibroid can be less than one inch in size or can grow to eight inches across and more. A bunch or cluster of fibroids can all vary in size.

## What are the risk factors for developing uterine fibroids?

- Current statistics show that African American women are three to five times more likely to develop fibroids than women of other racial groups.
- Women who are overweight or obese for their height based on body mass index have a slightly elevated risk of developing fibroids.
- Women with a family history also have a higher risk.
- Women who have given birth have a lower risk for developing fibroids.

However, because researchers don't know what causes fibroids, it is difficult to decipher all the risk factors.

## What symptoms do fibroids cause?

Although most fibroids don't cause any symptoms, the estimated 30% of women with symptoms experience:

- Heavy bleeding & bleeding in between periods that may lead to anemia.
- Abdominal pain or pressure, or feeling of abdominal "fullness"
- Frequent urination and in severe cases inability to urinate at all
- Pain during sexual intercourse
- Lower back pain
- Reproductive problems
- Painful periods

The symptoms will depend on where in the uterus the fibroids are located.

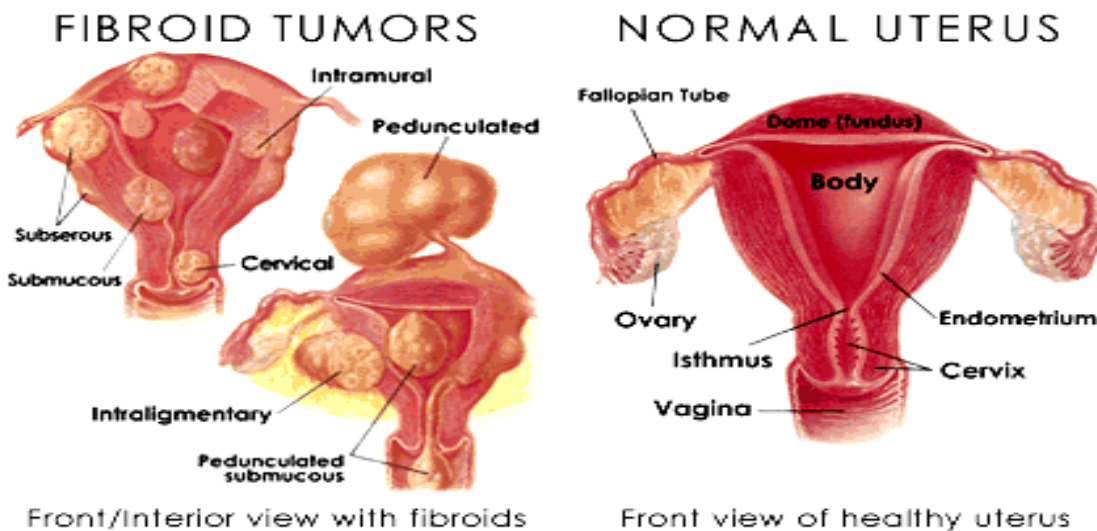
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## How are Fibroids diagnosed?

The diagnosis of fibroids is generally made by your physician during your annual gynecological exam when your doctor feels a mass. Sometimes they may be missed during exam if the patient does not complain of any symptoms and the fibroids are too small to feel.

An ultrasound is often ordered when such masses are felt or there is a suspicion based on your symptoms.



## Types of Fibroid Tumors

1. **Submucosal Fibroids** – occur just below the lining of the uterus and can cause menstrual problems, including pain as they grow. Typically also cause heavy bleeding.
2. **Intramural Fibroids** – occur within the uterine wall which can cause enlargement of the uterus as they grow.
3. **Subserosal Fibroids** – this fibroid grows on the outer wall of the uterus and usually causes no symptoms until it grows large enough to interfere with other organs.
4. **Pedunculated Fibroids** – develop when a subserosal fibroid grows a peduncle (stalk) as they grow larger they may become twisted and cause severe pain.
5. **Interligamentous Fibroids** – grows sideways between the ligaments which support the uterus in the abdominal region.

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## Treatment options for Fibroids

There are several treatment options for fibroids. If your fibroid tumors are severe enough that they cause certain symptoms, surgery is often the required treatment. Symptoms which justify surgery include: extremely heavy bleeding during your menstrual cycle, which causes anemia, pain which has become intolerable, abnormal bleeding, or when the location of the tumor is likely to cause further problems, i.e. infertility. Medical management may be attempted, however if not effective surgery may be required.

### *Surgical options for fibroids include:*

- **Myomectomy** – is the surgical removal of each individual tumor without damage to the uterus, preserving a woman's ability to conceive. However, fibroids may grow back and although it is possible to have a myomectomy repeated, multiple myomectomies can cause other problems such as the wall of the uterus sticking together due to scarring.

The different *approaches* to a myomectomy are as follows:

1. Hysteroscopic Myomectomy
2. Laparoscopic Myomectomy
3. Abdominal Myomectomy
4. Robotic Myomectomy

The best approach for an individual woman depends on the type of fibroid, symptoms, and number of fibroids.

- **Hysterectomy** – is commonly, the procedure of choice for fibroid tumors when a woman with symptoms has completed her family; a woman has excessively large fibroid tumors; abnormal bleeding occurs; or when the fibroids are causing problems with other organs such as the bladder or bowels. There are also different approaches to do a hysterectomy with out removing the ovaries and in some cases even the cervix can be preserved.

### For example:

1. Laparoscopic supracervical hysterectomy (LSH)
2. Laparoscopic assisted vaginal hysterectomy (LAVH)

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3. Total Abdominal hysterectomy (TAH)
  4. Total Vaginal hysterectomy (TVH)
- **Uterine artery embolization (UAE)** is a non-surgical option, depending on the size and number of fibroids present. In UAE the radiologist uses an x-ray camera called a fluoroscope to deliver small particles to the uterus and fibroids. These block the arteries that provide blood flow and cause the fibroids to shrink. Because the effect of uterine artery embolization (UAE) is not fully understood, UAE is typically offered to women who no longer wish to become pregnant or who want or need to avoid a hysterectomy.

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