

uterine fibroids



What are uterine fibroids?

Uterine fibroids (also called leiomyomas) are growths made up of the muscle and connective tissue from the wall of the uterus. These growths are usually not cancerous (benign).

Fibroids can grow as a single nodule (one growth) or in a cluster. Fibroid clusters can range in size from 1 mm to more than 20 cm (8 inches) in diameter or even larger. For comparison, they can get as large as the size of a watermelon. These growths can develop within the wall of the uterus, inside the main cavity of the organ or even on the outer surface. Fibroids can vary in size, number and location within and on your uterus.

You may experience a variety of symptoms with uterine fibroids and these may not be the same symptoms that another woman with fibroids will experience. Because of how unique fibroids can be, your treatment plan will depend on your individual case.

Are fibroids common?

Fibroids are actually a very common type of growth in your pelvis. Approximately 40 to 80% of people have fibroids. However, many people don't experience any symptoms from their fibroids, so they don't realize they have fibroids. This can happen when you have small fibroids — called asymptomatic because they don't cause you to feel anything unusual.

Who is at risk for uterine fibroids?

There are several risk factors that can play a role in your chances of developing fibroids. These can include:

- Obesity and a higher body weight (more than 20% over the weight that's considered healthy for you).
- Family history of fibroids.
- Not having children.
- Early onset of menstruation (getting your period at a young age).
- Late age for menopause.

Are fibroids cancer?

It's extremely rare for a fibroid to go through changes that transform it into a cancerous or a malignant tumor. In fact, one out of 350 people with fibroids will develop malignancy. There's no test that's 100% predictive in detecting rare fibroid-related cancers. However, people who have rapid growth of uterine fibroids, or fibroids that grow during menopause, should be evaluated immediately.

What are the symptoms of uterine fibroids?

Most fibroids do not cause any symptoms and don't require treatment other than regular observation by your healthcare provider. These are typically small fibroids. When you don't experience symptoms, it's called an asymptomatic fibroid. Larger fibroids can cause you to experience a variety of symptoms, including:

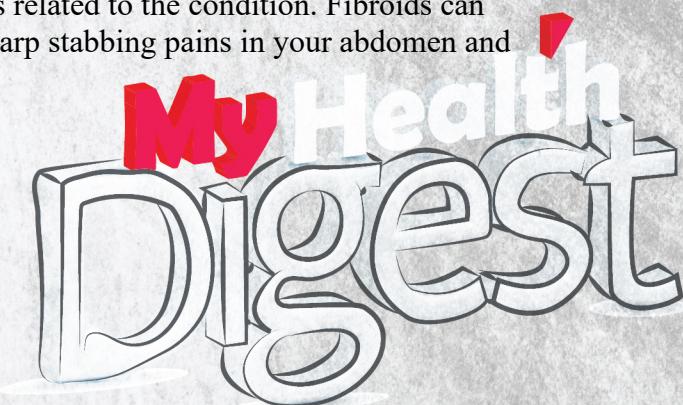
- Excessive or painful bleeding during your period (menstruation).
- Bleeding between your periods.
- A feeling of fullness in your lower abdomen/bloating.
- Frequent urination (this can happen when a fibroid puts pressure on your bladder).
- Pain during sex.
- Low back pain.
- Constipation.
- Chronic vaginal discharge.
- Inability to urinate or completely empty your bladder.
- Increased abdominal distention (enlargement), causing your abdomen to look pregnant.

The symptoms of uterine fibroids usually stabilize or go away after you've gone through menopause because hormone levels decline within your body.

What does uterine fibroid pain feel like?

There are a variety of feelings you might experience if you have fibroids. If you have small fibroids, you may feel nothing at all and not even notice they're there. For larger fibroids, however, you can experience discomforts and even pains related to the condition. Fibroids can cause you to feel back pain, severe menstrual cramps, sharp stabbing pains in your abdomen and even pain during sex.

How do Uterine Fibroids Affect the Fertility?

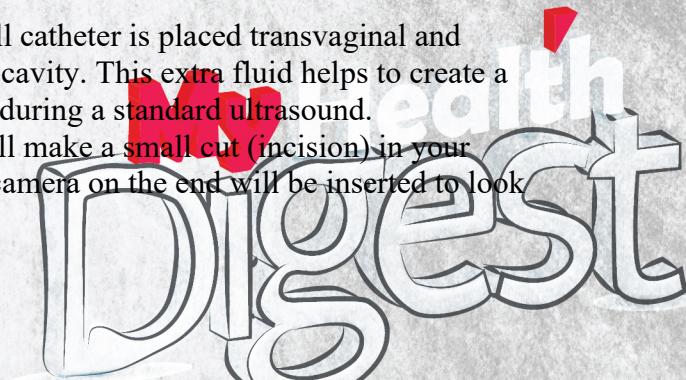


you can get pregnant if you have uterine fibroids. If you already know you have fibroids when you get pregnant, your healthcare provider will work with you to develop a monitoring plan for the fibroids. During pregnancy, your body releases elevated levels of hormones. These hormones support the growth of your baby. However, they can also cause your fibroids to get bigger. Large fibroids can prevent your baby from being able to flip into the correct fetal position, increasing your risk of a breech birth or malpresentation of the fetal head. In very rare cases, you may be at higher risk of a pre-term delivery or a C-section delivery. In some cases, fibroids can contribute to infertility. It can be difficult to pinpoint an exact cause of infertility, but some people are able to become pregnant after receiving treatment for fibroids.

How are uterine fibroids diagnosed?

In many cases, fibroids are first discovered during a regular exam with your health provider. They can be felt during a pelvic exam and can be found during a gynecologic exam or during prenatal care. Quite often your description of heavy bleeding and other related symptoms may alert your healthcare provider to consider fibroids as a part of the diagnosis. There are several tests that can be done to confirm fibroids and determine their size and location. These tests can include:

- **Ultrasonography:** This non-invasive imaging test creates a picture of your internal organs with sound waves. Depending on the size of the uterus, the ultrasound may be performed by the transvaginal or transabdominal route.
- **Magnetic resonance imaging (MRI):** This test creates detailed images of your internal organs by using magnets and radio waves.
- **Computed tomography (CT):** A CT scan uses X-ray images to make a detailed image of your internal organs from several angles.
- **Hysteroscopy:** During a hysteroscopy, your provider will use a device called a scope (a thin, flexible tube with a camera on the end) to look at fibroids inside your uterus. The scope is passed through your vagina and cervix and then moved into your uterus.
- **Hysterosalpingography (HSG):** This a detailed X-ray where a contrast material is injected first and then X-rays of the uterus are taken. This is more often used in people who are also undergoing infertility evaluation.
- **Sonohysterography:** In this imaging test, a small catheter is placed transvaginal and saline is injected via the catheter into the uterine cavity. This extra fluid helps to create a clearer image of your uterus than you would see during a standard ultrasound.
- **Laparoscopy:** During this test, your provider will make a **small cut (incision)** in your lower abdomen. A thin and flexible tube with a camera on the end will be inserted to look closely at your internal organs.



Do uterine Fibroids need treatment?

Treatment for uterine fibroids can vary depending on the size, number and location of the fibroids, as well as what symptoms they're causing. If you aren't experiencing any symptoms from your fibroids, you may not need treatment. Small fibroids can often be left alone. Some people never experience any symptoms or have any problems associated with fibroids. Your fibroids will be monitored closely over time, but there's no need to take immediate action. Periodic pelvic exams and ultrasound may be recommended by your healthcare provider depending on the size or symptoms of your fibroid. If you are experiencing symptoms from your fibroids — including anemia from the excess bleeding, moderate to severe pain, infertility issues or urinary tract and bowel problems — treatment is usually needed to help.

Can fibroids be prevented?

In general, you can't prevent fibroids. You can reduce your risk by maintaining a healthy body weight and getting regular pelvic exams. If you have small fibroids, develop a plan with your healthcare provider to monitor them.

