

Uterine Fibroids

Uterine fibroids are noncancerous growths of the uterus that often appear during your childbearing years. Also called fibromyomas, leiomyomas or myomas, uterine fibroids aren't associated with an increased risk of uterine cancer and almost never develop into cancer.

As many as 3 out of 4 women have uterine fibroids sometime during their lives, but most are unaware of them because they often cause no symptoms. Your doctor may discover them incidentally during a pelvic exam or ultrasound.

In general, uterine fibroids cause no problems and seldom require treatment. Medical therapy and surgical procedures can shrink or remove fibroids if you have discomfort or troublesome symptoms. Rarely, fibroids can require emergency treatment if they cause sudden, sharp pelvic pain or profuse menstrual bleeding. The most common symptoms of uterine fibroids include:

- Heavy menstrual bleeding
- Prolonged menstrual periods
- Pelvic pressure or pain
- Frequent urination
- Difficulty emptying your bladder
- Constipation
- Backache or leg pains

Rarely, a fibroid can cause acute pain when it outgrows its blood supply. A fibroid that hangs by a stalk inside or outside the uterus (pedunculated fibroid) can trigger pain by twisting on its stalk and cutting off its blood supply.

Fibroid location influences your signs and symptoms:

- Submucosal fibroids. Fibroids that grow into the inner cavity of the uterus (submucosal fibroids) are thought to be primarily responsible for prolonged, heavy menstrual bleeding and are a problem for women attempting pregnancy.
- Subserosal fibroids. Fibroids that project to the outside of the uterus (subserosal fibroids) can sometimes press on your bladder, causing you to experience urinary symptoms. If fibroids bulge from the back of your uterus, they occasionally can press either on your rectum, causing constipation, or on your spinal nerves, causing backache.

Many treatment options exist to help with the symptoms caused by fibroids.

Watchful waiting:

If you're like most women with uterine fibroids, you have no signs or symptoms. In your case, watchful waiting (expectant management) could be the best course. Fibroids aren't cancerous. They rarely interfere with pregnancy. They usually grow slowly and tend to shrink after menopause when levels of reproductive hormones drop. This is the best treatment option for a large majority of women with uterine fibroids.

Medications:

Medications for uterine fibroids treat symptoms such as heavy menstrual bleeding and pelvic pressure. They don't eliminate fibroids, but may shrink them. Medications include:

- Gonadotropin-releasing hormone (Gn-RH) agonists Lupron, Synarel,
- Progestin-releasing intrauterine device (IUD).
- Oral contraceptives or progestins
- Nonsteroidal anti-inflammatory drugs

Surgical:

Hysterectomy, Myomectomy:

Abdominal myomectomy , Laparoscopic myomectomy, Hysteroscopic myomectomy.

Other procedures to shrink or destroy fibroids:

Endometrial ablation, Uterine artery embolization

Focused ultrasound surgery

MRI-guided focused ultrasound surgery (FUS) is a noninvasive treatment option for uterine fibroids that preserves your uterus.