

Spartanburg

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Uterine Fibroids

Leiomyomas are non-cancerous tumor growths of the muscles and tissue of the uterus. Fibroids may occur as a single growth or in clusters. They can also vary in size. They can be located on the inner (sub mucosal) or outer (serial) surface of the uterus as well as within (intramural) the uterine wall. Approximately 25-50% of women get fibroids, most commonly over the age of 35.

Symptoms

Most fibroids produce no symptoms. However, when symptoms do occur they may cause:

- Changes in menstruation ~ Heavy bleeding, bleeding between periods, longer periods
- Pelvic pressure ~ May cause frequent urinating, difficult bowel movements
- Pain ~ Low abdominal or lower back pain, painful intercourse
- Infertility ~ Difficulty getting pregnant, may increase risk for miscarriage or preterm labor
- Enlarged abdomen

Diagnosis

- Ultrasound ~ Sound waves create a picture of the pelvic organs.
- Hysteroscopy ~ a slender camera is inserted through the cervix and the lining of the uterus can be visualized.
- Laparoscopy ~ Small incisions are made in the abdomen and a camera may see fibroids on the outer uterus.
- MRI and CT Scans ~ imaging tests that can sometimes see pelvic organs, but usually an ultrasound is adequate.

Treatment Options *(No treatment is necessary if the fibroids do not cause any symptoms)*

- Medications ~ sometimes hormonal treatments such as birth control may control symptoms. In addition, drugs such as gonadotropin-releasing hormone (GnRH) agonists may be used before surgery to shrink fibroids.
- Myomectomy ~ surgical removal of the fibroids while keeping the uterus in place. This is an option that maintains a woman's ability to bear children after surgery. Depending on the size and location a myomectomy may be performed by:
 - Laparotomy ~ Surgery through an open incision on the abdomen.
 - Laparoscopy ~ (see above description)
 - Robot-assisted ~ Similar to laparoscopy, but with enhanced surgical precision.
 - Hysteroscopy ~ (see above description)
- Hysterectomy ~ the uterus is removed along with the fibroids. This may be done with laparotomy, laparoscopy, robotic surgery, or through the vagina.
- Uterine Artery Embolization ~ a procedure performed by a radiologist that blocks the blood flow that permits the fibroids to grow.