


# Uterine Fibroids

## Shared Decision-Making



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### Objectives

1. Discuss prevalence, terminology, locations, risks, and common presenting symptoms of uterine fibroids.
2. Describe the evaluation and diagnostic processes for someone with possible uterine fibroids.
3. Articulate various treatment options, including watchful waiting, medical management, and procedures that may be utilized for the treatment of uterine fibroids and how the treatment is individualized to a specific patient's desires.

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### General Information

#### Fibroids

- Called various names
  - Leiomyomas
  - "Myomas"
- Extremely common uterine tumors
  - 70 – 80 % of women
- Growth of smooth muscle cells
  - Usually benign
  - Symptomatic in 20 – 50% of women



Uterine Fibroids

<https://www.stanford.edu/content/health-center/health-ency-multimedia/5/10/2023.html>

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Symptoms

- Pelvic pain and pressure**
  - During menstrual cycles
  - Pelvic pain
  - Back pain
- Anemia**
  - Chewing ice
  - Dizziness
  - Fatigue
- "Bulk" symptoms**
  - Abdominal protrusion

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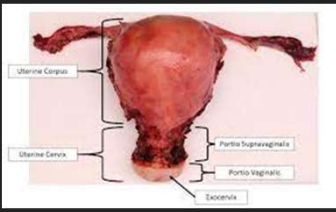
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Normal Uterus



<https://www.pathologyoutlines.com/topic/uterusnormal.html>

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Fibroid Uterus



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### Symptoms from Fibroids

- Heavy monthly periods
  - Passing large clots of blood
  - Prolonged periods
  - Bleeding between periods
- Pain during sexual intercourse
- Frequent need to urinate
- Difficulty achieving pregnancy
- Recurrent miscarriages

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### Risks for Fibroids

- Increasing age
  - Up to menopause
  - 52 years-old
- Fibroids in other family members
  - Specific genetic mutations
- African American race
  - More symptoms
  - Quality of life more affected
- No or few pregnancies
- Early menarche
- Use of birth control pills before age 16
- High BMI

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### Things that lower risk of fibroids

- More pregnancies
- Use of progesterone injection contraception
- Diet high in
  - Fruits
  - Vegetables
  - Non-fat dairy

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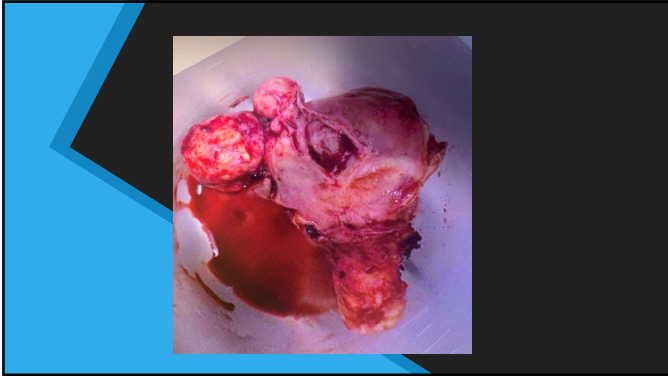
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### Diagnosing Fibroids

- Suspected
  - Enlarged uterus on gynecology exam
  - Heavy menstrual cycles
- Imaging
  - Ultrasound
- Evaluate for anemia
  - Check blood count and iron levels

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### Risk of Cancer in Fibroids

- Leiomyosarcoma
- Risk increases with age
  - < 40 years-old
    - 1:1500 women with fibroids
  - 40 – 44 years-old
    - 1:1100 women with fibroids
- Higher risk
  - Pelvic radiation treatment
  - Use of Tamoxifen
  - Rare genetic syndromes
  - Rapidly enlarging fibroids
- No definitive test before surgery to rule out cancer

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### Costs Associated with Fibroids

- Annual health care costs in US related to fibroids
  - Over \$34 billion



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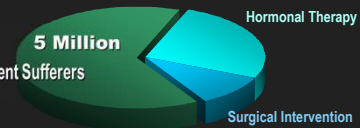
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### Heavy Menses Disrupt Women's Lives

5 Million Silent Sufferers



Hormonal Therapy

Surgical Intervention

National Women's Health Resource Center. National survey of 633 women, 35-49 with reported heavy periods and intact uterus, conducted Sept 29-Oct 12, 2005.

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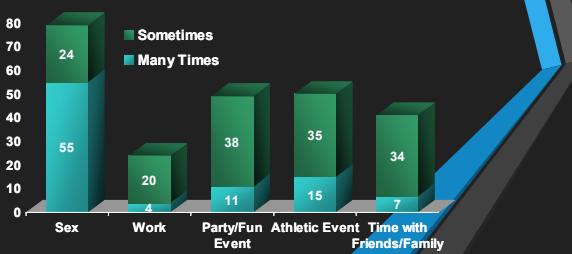
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### "How Often Does Your Period Cause You to Miss the Following Activities?"



Activity	Many Times	Sometimes
Sex	55	24
Work	4	20
Party/Fun Event	11	38
Athletic Event	15	35
Time with Friends/Family	7	34

National Women's Health Resource Center. National survey of 633 women, 35-49 with reported heavy periods and intact uterus, conducted Sept 29-Oct 12, 2005.

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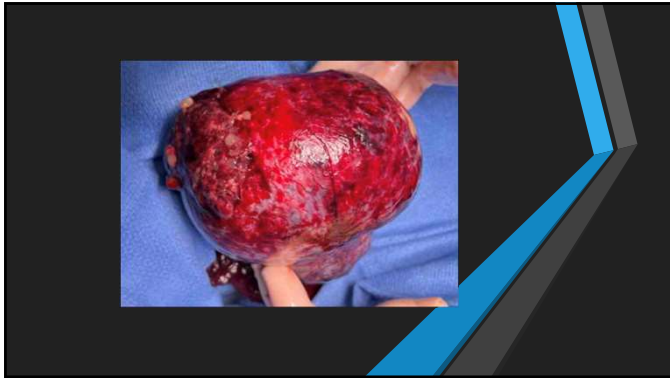
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### Treatment for Fibroids

- Combined and shared decision-making
- Consider all options appropriate for individual
- Watchful waiting
  - Small fibroids
  - Minimal to no symptoms
  - Not rapidly enlarging
- Medical treatment
- Surgical treatments

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### Treatment for Fibroids

- Therapy is individualized for specific person
  - Size of fibroids
  - Number of fibroids
  - Location of fibroids
  - Symptoms
  - Desire for pregnancy

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### Medical Therapies for Fibroids

- Medical therapies to slow menstrual bleeding
  - Tranexamic acid
    - Oral prescription medication
    - Taken only on days of heavy flow
    - Few side effects
    - Concern for blood clots (?)
  - NSAIDs
    - Ibuprofen
    - Take only on days with heavy bleeding

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### Uterine-Sparing Treatment for Fibroids

- Myomectomy
  - Most common uterine-sparing procedure
  - May be done hysteroscopically
    - Fibroids inside the uterus
    - Outpatient surgery
    - No incision

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### Hysteroscopic Myomectomy



The slide features a diagram on the left showing a hysteroscopic myomectomy procedure with a resectoscope inserted into the uterus. On the right, two side-by-side endoscopic views are shown: 'NORMAL' showing a clear uterine cavity and 'FIBROID' showing a large, protruding mass within the cavity.

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## Myomectomy

- Myomectomy
  - Most common uterine-sparing surgery
  - May be done through the abdomen
  - Large abdominal incision
  - Laparoscopic or robotic
  - Remove fibroids from uterus



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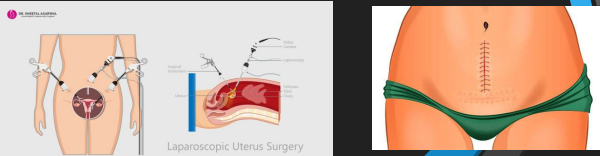
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## Myomectomy



Laparoscopic Uterus Surgery

<https://www.dishetaAgarwal.com/blog/laparoscopic-surgery-crucial-things-you-need-to-know>

<https://www.ebgnofstar.com/myomectomy>

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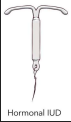
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## Uterine-Sparing Treatment for Fibroids

- Progesterone IUD
  - Decreases menstrual bleeding
  - Higher rate of expulsion with larger fibroids
- Birth control pills
  - Estrogen and progesterone
  - Progesterone only



Hormonal IUD

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### Uterine-Sparing Treatment for Fibroids

- Endometrial ablation
  - For women with smaller fibroids only
  - For women done with childbearing
  - Destroy the lining of the uterus, or endometrium
  - Uses heat, cold, other mechanical means
  - Need reliable contraception after procedure
  - Significantly reduces menstrual flow

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### Endometrial Ablation

Radiofrequency

Microwave

<https://www.cmrhc.com/treatment-of-endometrial-ablation-failure>

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### Endometrial Ablation

Hydrothermal

Cryo

Heated plasma energy

Silicone balloon

<https://www.cmrhc.com/treatment-of-endometrial-ablation-failure>

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## Uterine Artery Embolization

- Done in radiology department
- For women done with childbearing
- Abdominal pain and cramps after procedure
- Complications
  - Bleeding, bruising, infection
  - Injury to artery or uterus
- Takes time for fibroids to shrink
  - Up to one year

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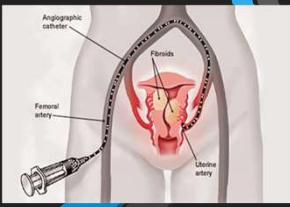
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## Uterine Artery Embolization



The diagram shows a female torso from the waist up. An angiographic catheter is inserted into the femoral artery in the right leg. The catheter is threaded up to the pelvic region where the uterine artery is located. A fibroid is shown attached to the uterine artery. Labels include: Angiographic catheter, Femoral artery, Fibroids, and Uterine artery.

- Tiny particles injected into blood vessels
- Cut off blood flow to fibroid and shrink it
- Can treat many fibroids with one procedure
- 1 in 5 women need another procedure later

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## Hysterectomy for Fibroids

- Removing the uterus along with fibroids
- Only treatment that prevents recurrence
- Done when completed childbearing
- Significantly improves quality of life
- Can leave ovaries for hormonal reasons
  - Prevent early menopause

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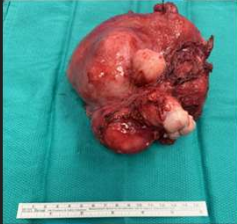
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### Hysterectomy for Fibroids

- Multiple approaches
  - Abdominal
  - Vaginal
  - Laparoscopic
  - Robotic
- Many go home same day
- 6 weeks no heavy lifting



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### Hysterectomy for Fibroids

- Complications
  - Injury to bladder, bowel, ureters
  - Infection
  - Blood transfusion
- Accounts for 3% of all fibroid procedures
  - Numbers are decreasing
  - Rate varies in different geographic locations
  - Concern with overuse of hysterectomy
  - More uterine-sparing procedures are available and being done

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### Radiofrequency Ablation Procedure (RFA)

- Individually treats each fibroid
- Heats the tissue until the fibroid tissue dies
- Most fibroids can be treated
- Not for women who desire future pregnancies
- Complications are rare
  - Skin burns
  - Adhesions or scar tissue
  - Mild bleeding
  - Urinary tract infection
  - Injury to adjacent structures
  - Cramping and pelvic pain after procedure

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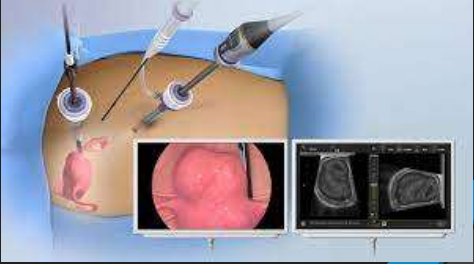
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### Radiofrequency Ablation Procedure (RFA)



- Greatest effects seen 3-6 months after procedure
- Limited availability of the procedure, but expanding

<https://www.digipetrol.com/content/services/liver-raf-procedure>

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Thank you!

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