

Fibroids

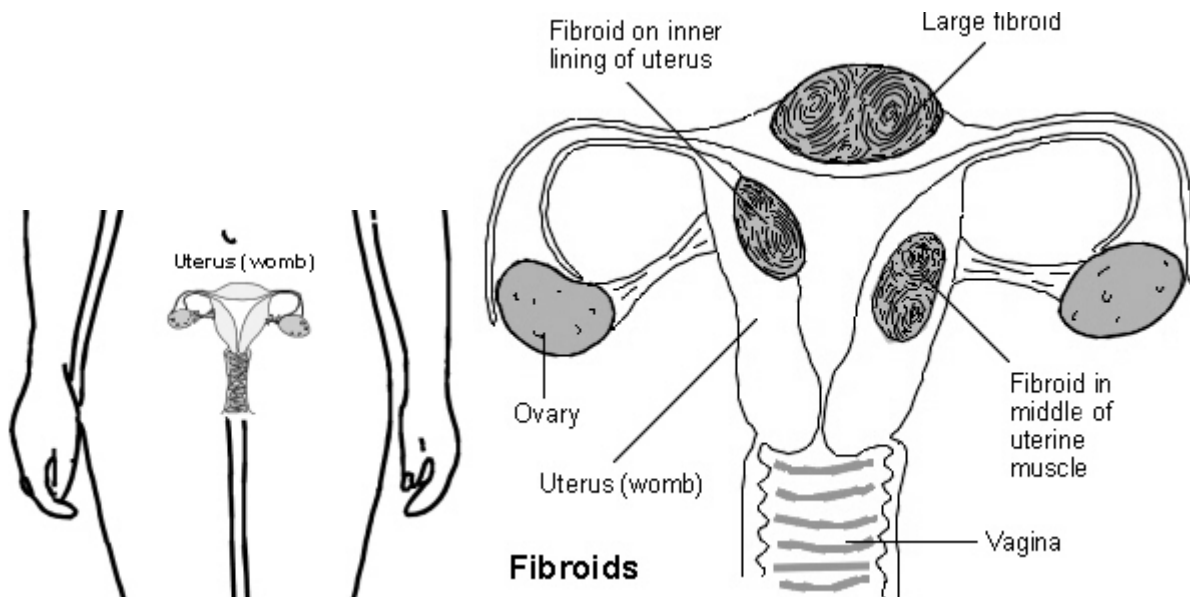
Fibroids are common. They usually cause no symptoms. Treatment with medication or surgery is options if symptoms occur.

What are fibroids?

A fibroid is a benign (non-cancerous) growth of the uterus (womb). They can vary from pea-sized to the size of a melon. They can occur anywhere in the uterus.

How common are fibroids.

At least 1 in 5 women develop one or more fibroids in their lifetime. They usually develop in women aged 30-50. It is common to have several fibroids of various sizes. Fibroids are more common in women from Afro-Caribbean origin.



What causes fibroids?

A fibroid is like an overgrowth of smooth muscle cells. (The uterus is mainly made of smooth muscle.) It is not clear why they develop. Like the uterus, fibroids are sensitive to estrogen. This is the hormone that is made in the ovary. Fibroids tend to swell when levels of estrogen are high, for example, during pregnancy. They also shrink when estrogen levels are low, for example, after the menopause.

What symptoms and problems are caused by fibroids?

Usually *none*
No symptoms or problems occur in most women who have fibroids. Many women who have fibroids are not aware that they have them. Sometimes one is found during a routine examination by a doctor or by a scan for another reason.

Symptoms *sometimes* *develop*
One or more of the following are possible symptoms or problems.

- Heavy or more painful periods.
- Lower abdominal discomfort or swelling may develop if a fibroid is large.
- Occasionally a fibroid may press on the bladder. You may then pass urine more often than usual. Rarely, pressure on the rectum may cause constipation.
- Repeated miscarriage or infertility is an uncommon complication.
- Rarely, large fibroids cause complications of pregnancy and labor.

How are fibroids diagnosed?

Some fibroids can be felt during an internal (vaginal) examination by a doctor. Sometimes an ultrasound scans or other tests are done to confirm the diagnosis and to rule out other causes of symptoms.

What is the treatment for fibroids?

No *treatment* *may* *be* *an* *option*
Treatment is not needed if fibroids cause no symptoms. Many women choose to do nothing even if they have symptoms that are not too bad. Fibroids often shrink and symptoms go or ease after the menopause. You can change your mind and consider treatment if symptoms get worse.

Treatment *with* *medication*
The most effective medication is a *gonadotropin releasing hormone agonist (GnRHa)*. This is a hormone medicine that causes a very low estrogen level in the body. Fibroids shrink if the level of estrogen falls. This can ease heavy periods and pressure symptoms due to fibroids. However, a low estrogen level can cause symptoms similar to going through the menopause (hot flushes, etc). It may also increase the risk of osteoporosis. Therefore, this treatment is not given long term. It may be used to shrink large fibroids prior to surgery (to make surgery easier). More recently a combination of a GnRHa plus 'add back' Hormone Replacement Therapy (HRT) with low dose estrogen has been used to shrink the fibroids but prevents the 'menopausal' side effects.

The following medicines are also used to treat heavy periods whatever the cause. They may not be so effective if fibroids are large. However, they may be worth a try if periods are heavy and fibroids are small.

- *Tranexamic acid* - which is taken 3-4 times a day for 3-4 days each period. It works by reducing the breakdown of blood clots in the uterus.
- *Anti-inflammatory medicines* - such as ibuprofen and mefenamic acid. These also help to ease period pain. They are taken for a few days each period. They work by reducing the high level of

prostaglandin in the uterus lining which seems to contribute to heavy periods.

- *The contraceptive pill* - may help and often helps with period pain too.
- *Levonorgestrel intrauterine system (LNG-IUS)* - is similar to an intrauterine device (IUD) used for contraception. It is inserted into the uterus and slowly releases a regular small amount of progestogen hormone called levonorgestrel. It works by making the lining of the uterus very thin (atrophied) so bleeding is lighter.

Surgical treatments

- *Hysterectomy* - is the traditional treatment for fibroids that cause symptoms. This is the removal of the uterus (womb). It is a fairly major operation.
- *Myomectomy* - is an alternative. However, it is not always possible depending on the size, number and position of the fibroids. In this operation the fibroids are 'shelled out' of the uterus. Most myomectomies are done through a cut (incision) in the abdomen. Some fibroids near the lining of the uterus can be removed through the vagina without an abdominal cut. Recurrence of the fibroid may occur after myomectomy.
- *Uterine Artery Embolization* - is a new technique used for large fibroids. It involves putting a catheter (a thin flexible tube) into an artery (blood vessel) in the leg. It is guided using x-ray pictures to the arteries of the uterus. Once there, a chemical is injected along the catheter to the uterine arteries. This causes a blockage in the arteries. The fibroid then loses its blood supply and it shrinks. As this treatment is quite new, the long-term safety and effectiveness are not clear. However, early reports are encouraging. It may only be available in certain hospitals but is likely to become more widely available in the future.

In summary

- Fibroids are common. They usually cause no problems or symptoms.
- Treatment is not needed if symptoms do not occur.
- Heavy periods are the commonest symptom. Medication may ease this.
- Hysterectomy is the traditional cure if symptoms persist.
- Myomectomy ('shelling out of the fibroids') is sometimes an alternative.
- Uterine Artery Embolization is a newer technique that may become more popular.