

## ***Uterine Fibroids***

Fibroids are noncancerous growths of the uterus that appear during childbearing age. Nearly three out of four women have one or more fibroids. They may be discovered on a routine pelvic exam or on a pelvic ultrasound.

Most fibroids do not cause symptoms and may not need treatment. Fibroids range in size from very small to very large. The exact cause of fibroids is not known. There may be genetic factors that influence growth as well as hormonal factors.

Signs and symptoms that may be attributed to fibroids include painful periods, heavy periods, abnormal bleeding, or bleeding in between periods. Pelvic pain or pressure as well as urinary frequency and constipation may also be related. Please see your doctor if you have any of the signs or symptoms mentioned.

Fibroids may occur under the lining of the uterine cavity (sub-mucosal), in the muscle wall of the uterus (intramural), or on the outer surface of the uterus (sub-serosal). The location of the fibroids may influence the symptoms and the treatment options.

There are many treatment options for fibroids. Treatment may not be necessary at all if there are no significant symptoms and they may be followed by your doctor. There are medications that can be used to shrink fibroids, although this is usually a temporary measure. Hysterectomy, the removal of the uterus, is the only proven permanent solution for fibroids. This may be the best option if future childbearing is not desired, and it may be the only viable option for very large or multiple fibroids. There are some non-invasive options for some situations that include endometrial ablation, uterine artery embolization, and focused ultrasound surgery. Myomectomy is a term to describe the surgical removal of fibroids. This is used for patients who desire to preserve their ability to have children. There is a risk of recurrence with this procedure. The treatment that is best for you will be determined after consultation with your doctor.