Fibroids

What are fibroids?

Fibroids (also called *leiomyomas* or *myoma*) are benign tumours of smooth muscle of the uterus (womb). They can vary in size from a pea to a grapefruit and also vary in the rate of growth. Fibroids can develop anywhere in the uterus from deep within the muscular wall of the uterus to on the outside of the wall or inside the wall.

What is the cause of fibroids?

The reason why they develop inside the uterus is unknown. However, it is known that the sex hormones, oestrogen (in particular) and progesterone, are related to fibroids since they stop growing and tend to shrink with the onset of the menopause. They are rare in girls before puberty. They increase in size during pregnancy.

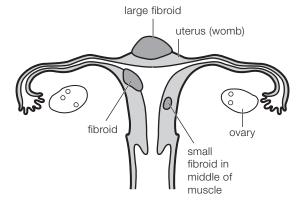
What are the main features of fibroids?

- Most common in women between 35 and 45 years
- Present in 40% of women over 40 years
- More common in Afro-Caribbean women
- Only 1 in 800 develop cancer
- Most cause no symptoms

What are the symptoms?

If the following symptoms do occur, it is due to large fibroids:

- heavy periods (menorrhagia)
- lengthy periods
- spotting between periods



- painful periods (dysmenorrhoea)
- painful intercourse
- pelvic discomfort (from pressure)—heaviness in back, bowel or bladder
- bladder problems—frequency or incomplete emptying of urine
- hard lump or swelling in lower abdomen.

What investigations are often used?

- Pelvic ultrasound
- Hysteroscopy—to look inside the uterus
- Full blood examination to check for anaemia
- Biopsy of the uterus (if cancer is suspected)

What are the complications?

Fibroids usually cause no problems, but some complications can include:

- infertility
- anaemia from menorrhagia
- acute pain from twisting or degeneration
- miscarriage
- labour problems (premature labour, obstructed delivery).

What is the treatment for fibroids?

If fibroids are causing no or few symptoms a 'wait and see' approach can be taken with regular monitoring (every 6 to 12 months). If women are over 45 the fibroids tend to get smaller or even disappear.

Special hormones can be given to shrink the fibroids (especially if over 42 years of age).

Surgical options include:

- myomectomy: this removes, 'shells out', fibroids only (good if more children wanted)
- hysteroscopic resection
- uterine artery embolisation to block blood supply to fibroids
- hysterectomy: this is the traditional treatment for serious symptoms but is a major operation and reserved as a last resort if medication does not control the bleeding.