



## Fibroids

### What are fibroids?

Fibroids are fairly common benign tumours arising from the muscle layer of the uterus. They can vary in number and size and can occur anywhere in the uterus.

### What are the symptoms of fibroids?

The symptoms are very variable and depend on the site, size and number of the fibroids. Some women have few or no symptoms.

Women with large fibroids can experience symptoms due to pressure on any of the surrounding structures such as the bowel or bladder.

Fibroids very close to or inside the cavity of the womb may lead to heavy periods. Sometimes fibroids can also cause infertility or lead to repeated miscarriages.

In pregnant women, sometimes fibroids temporarily increase in size and cause pain or interfere with labour. However fibroids are usually not removed during pregnancy but rather dealt with afterwards.

### When should fibroids be treated?

Fibroids are generally treated when they cause symptoms. Again the treatment depends on the symptoms, site and size.

Treatment can include surgical options (myomectomy or hysterectomy) or embolisation. These are described over the page.

Not all fibroids however need to be treated, particularly if you are close to the menopause, after which fibroids can shrink in size.

### **What is a myomectomy?**

This is a surgical procedure where only the fibroid is removed. It is meant to preserve the uterus and therefore fertility.

Fibroids within the cavity of the womb (submucous fibroids) can usually be removed using a hysteroscope (a telescope inserted through the neck of the womb) while larger fibroids, those within the wall (intramural) or on the surface (subserous) are removed through an abdominal incision.

Sometimes the procedure can be performed through keyhole surgery (laparoscopy).

### **What are the risks of myomectomy?**

Fibroids usually have a very good blood supply and therefore can bleed whilst being removed. Usually it is possible to control the bleeding, but very occasionally the only way to do this is to remove the uterus (hysterectomy).

There is also a chance that fibroids may recur after their removal, although this may take many years, by which time you may have completed your family.

### **When is a hysterectomy needed?**

When fertility is no longer required, particularly when there are many or recurrent fibroids; hysterectomy may be needed. Again this may be performed through an abdominal incision or through keyhole surgery depending on the size and location of the fibroid

### **What is embolisation?**

This is a procedure performed by the radiologists as an occasional alternative to a hysterectomy.

A small tube (catheter) is inserted into the blood vessels that feed the fibroid. Small particles are then inserted into the vessel to cut off the blood supply to the fibroid. This should lead to the fibroid shrinking in size.

### **Are there any medications to treat fibroids?**

Occasionally some drugs known as GnRh analogues can be given to shrink fibroids.

These are usually only used as a temporary measure to control symptoms such as bleeding in preparation for surgery.

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