

Need relief from uterine fibroids? You may have options

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More than half of women eventually develop fibroids, which are noncancerous tumors that develop in the uterus. Most of the time, they don't have any symptoms and cause no problems, but when they do, women may experience:

- Heavy menstruation requiring more than 10 pads or tampons each day
- Periods lasting longer than a week
- Pain or pressure in the pelvic area
- Frequent or difficult urination
- Pain during sexual intercourse
- Constipation, bloating or abdominal swelling

While the exact cause of fibroids is unknown, genetics or changes in hormones can contribute to the growth of fibroids.

Many women diagnosed with [uterine fibroids](#) are told a hysterectomy is their only option for relief, but often fibroids can be treated with more conservative or noninvasive options. Depending on a patient's age or [medical history](#), your doctor may prescribe [birth control pills](#) or an intrauterine device (IUD). Both can decrease bleeding and pain caused by fibroids.

Advanced procedures such as [uterine fibroid embolization](#) (UFE) can be considered if those measures are not effective. In this [nonsurgical procedure](#), interventional radiologists insert a tiny tube into the uterine artery to cut off the fibroid's blood supply, causing it to shrink. This procedure is done under twilight sedation and takes less than two hours. The procedure will not leave any scars. It's an option for women who do not want surgery or may not be good candidates for it and who want to keep their uterus. One out of 10 patients may need a hysterectomy after UFE within five years.

If you suspect you have uterine fibroids, talk to your gynecologist about treatment options.

Provided by University of Kentucky

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