

Uterine Fibroids

Dr. Javier Vega Cárdenas Medical Staff, IECH Fertility Center

Uterine Fibroids, also known as Leiomyomas and Fibromas are the most common benign tumors (of the uterus). They originate from the muscle cells of the uterus and it is estimated that 20 - 30% of all women have them. Usually the onset of these tumors is between 30 and 40 years of age, but can happen at any age.

Ninety-nine percent of the time these tumors are benign (not cancerous); However, they can cause many problems because of their size (they can vary, from very small to large masses), number (there can be one or many), location (they can be within the uterine cavity, on its wall, on its surface, or attached to an anatomical structure of the pelvis), as well as the rate at which they grow (almost null, or they can display rapid growth).

Several studies have shown that their growth is influenced by female hormones called estrogens. For this reason they can grow during pregnancy, or decrease in size during menopause. It is estimated that less than half of the women with fibroids have symptoms. Some symptoms can be changes in menstruation (heavier flow, longer duration, and shorter intervals between periods), menstrual colic, lower abdominal pain, pain during intercourse, the feeling of abdominal pressure, an increase in urination or difficulty to urinate, constipation, or rectal pain.

There is also a correlation between the development of fibroids, aborted pregnancies, and infertility. For the most part, a routine pelvic exam can be done to determine the existence of fibroids. There are also other tests that can reveal the presence of uterine fibroids such as a pelvic ultrasound (pelvic echo), a Hysteroscopy (a small lens is introduced into the cervix to see its interior), a Hysterosalpingography (a special X ray), or with a Laparoscopy, in which a small camera is introduced through the abdominal wall to visualize the anatomical structures of the pelvis. Once a diagnosis has been established it is important to speak to your doctor in order to come up with the best treatment. This should be based upon the symptoms and the couple's desire to procreate.

There are several treatments available, such as medications that can reduce the production of hormones that in turn, will reduce the size of the fibroids (temporary treatment). There are also surgical procedures, one of which is called Fibroidectomy (removal of the fibroid(s), but leaving the uterus intact) and the other called a Hysterectomy in which the uterus is removed.