

## Uterine Fibroids

Uterine fibroids are very common non-cancerous (benign) growths that develop in the muscular wall of the uterus. They can range in size from very tiny (few centimeters) to larger than an apple. Occasionally, they can cause the uterus to grow to the size of a five-month pregnancy. In most cases, there is more than one fibroid in the uterus. While fibroids do not always cause symptoms, their size and location can lead to problems for some women, including pain and heavy bleeding.

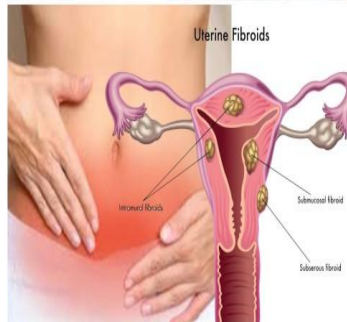
Uterine fibroids are the most common tumors of the female genital tract. Fibroid tumors of the uterus are very common, but for most women, they either do not cause symptoms or cause only minor symptoms.

20 to 40 percent of women age 35 and older have uterine fibroids of a significant size. Uterine fibroids are the most frequent indication for hysterectomy in premenopausal women and, therefore, are a major public health issue.



## DID YOU KNOW?

Uterine fibroids are benign tumors that develop from the smooth muscle layer of the uterus. Some studies show that up to 50% of women have fibroids.



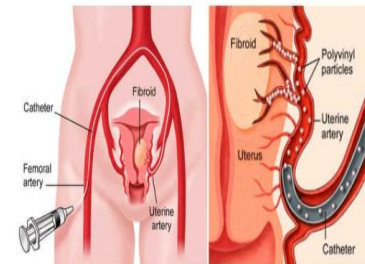
## Uterine Fibroid Symptoms

- ◆ Inability to have children
- ◆ Heavy, prolonged menstrual periods and unusual monthly bleeding, sometimes with clots; this can lead to anemia
- ◆ Pelvic pain and pressure
- ◆ Pain in the back and legs
- ◆ Pain during sexual intercourse
- ◆ Bladder pressure leading to a frequent urge to urinate
- ◆ Pressure on the bowel, leading to constipation and bloating
- ◆ Abnormally enlarged abdomen

## Nonsurgical Uterine Fibroid Embolization

Uterine Fibroid Embolization (UFE), also known as uterine artery embolization, is performed by an interventional radiologist, who are trained to perform such minimally invasive procedures. This procedure does not require general anesthesia.

The interventional radiologist makes a tiny nick in the skin in the groin and inserts a catheter into the femoral artery. Using real-time imaging, the physician guides the catheter through the artery and then releases tiny particles, the size of grains of sand, into the uterine arteries that supply blood to the fibroid tumor. This blocks the blood flow to the fibroid tumor and causes it to shrink and die.

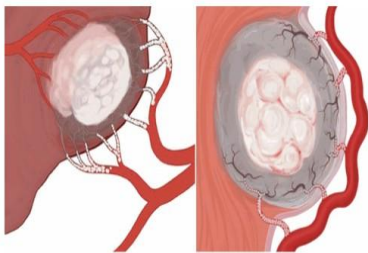


## UFE Recovery Time

Fibroid embolization usually requires a hospital stay of one night. Pain-killing medications and drugs that control swelling typically are prescribed following the procedure to treat cramping and pain. Many women resume light activities in a few hours time and majority of women are able to resume normal activities within a few days.

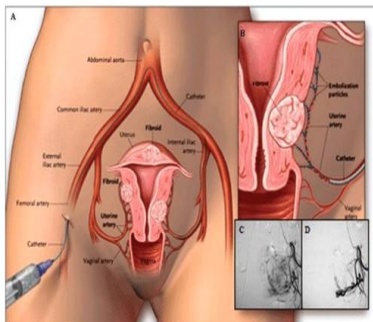
### UFE Efficacy

- ◆ Most of the women who have had the procedure experience significant or total relief of heavy bleeding, pain and/or other bulk related symptoms.
- ◆ The procedure is effective for multiple fibroids and large fibroids.
- ◆ Recurrence of fibroids treated by UFE is very rare.



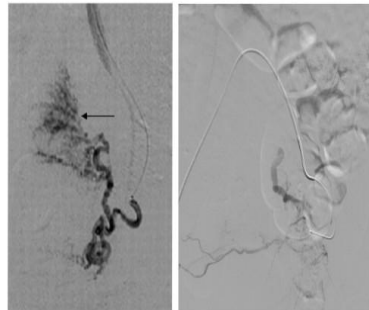
### Effect on Fertility

There have been numerous reports of pregnancies following uterine fibroid embolization



### Risks

UFE is a very safe method and, like other minimally invasive procedures, has significant advantages over conventional open surgery. However, there are some associated risks, as there are with any medical procedure. A small number of patients have experienced infection, which usually can be controlled by antibiotics. There also is a less than one percent chance of injury to the uterus, potentially leading to a hysterectomy. These complication rates are lower than those of hysterectomy and myomectomy.



Thanks to non-surgical uterine fibroid embolization procedure thousands of women worldwide are cured of fibroid related pain, heavy bleeding and other related symptoms and are leading normal healthy life.

## Treatment for fibroids without surgery



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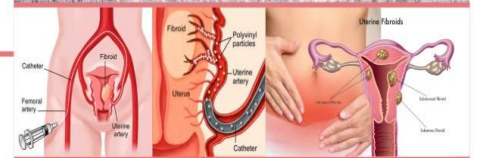
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