

Fibroids:

This term refers to an overgrowth of the smooth muscle of the uterus, hence the term fibroid uterus or myoma. It is one of the most common reasons for hysterectomy and is mostly a benign condition. In some cases it may be an incidental finding on a scan. If you have no symptoms then the gynaecologist will advise you further as regards follow-up. Fibroids may be located at different areas in the uterus such as, in wall of the uterus (intramural), under the surface of the uterus (subserosal), under the lining of the uterus (submucosal) and sometimes they may be attached to a stalk arising from the uterus (pedunculated).

When they are bigger and result in pressure symptoms, heavy menstrual bleeding, anemia, infertility etc. depending on the size and location treatment options will be discussed. If you have completed your family, symptomatic from the large fibroids, most likely a hysterectomy will be advised. Other treatment options include oral medication, surgical removal of only the fibroid (referred to as a myomectomy) or uterine artery embolization (a radiological procedure to stop the blood supply to the fibroids which result in shrinkage of the fibroid over time).