

Understanding Uterine Fibroids

Uncover the details

Check out the video at the link below
to learn how to prepare for surgery*

www.fibroidsandanemia.ca



* Please consult your
physician as surgery
may be required to
treat uterine fibroids.

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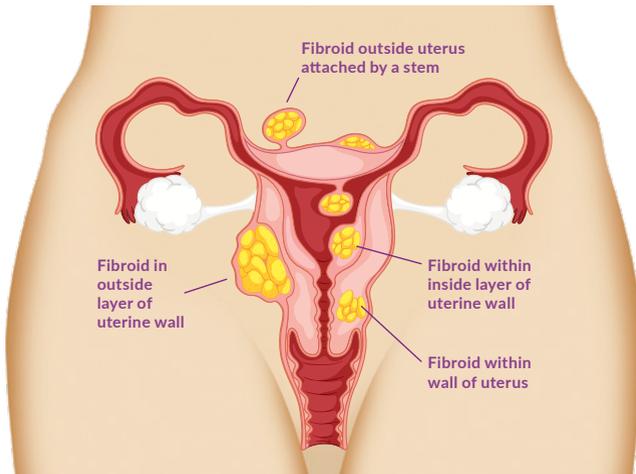
What are uterine fibroids?

Uterine fibroids (also known as myomas or leiomyomas) are growths that develop in the wall of the uterus. These growths are benign (not cancerous) and can cause abnormal menstrual bleeding, pelvic pain and pressure that may interfere with normal daily activities.

Where are fibroids found?

Fibroids are most often found in or around the uterus as shown in the diagram below.

Location of fibroids



Adapted from The American College of Obstetricians and Gynecologists (FAQ: Uterine Fibroids).

Common symptoms

Uterine fibroids may lead to one or more of the following symptoms:

- Changes during your period
 - Longer, more frequent or heavy periods

- Cramps
- Vaginal bleeding at times other than during your period
- Low levels of hemoglobin or red blood cells from excessive blood loss (Anemia). This may make you feel tired, dizzy, short of breath and weak.

- Pain
 - In lower belly or lower back
 - During sex
- Pressure
 - Difficulty urinating or frequent urination
 - Constipation, rectal pain or difficult bowel movements
- Enlarged abdomen
- Miscarriages
- Infertility

The type of symptoms you have is often related to the size, the number and the location of the fibroids. Some fibroids may cause no or very little symptoms despite their size.

Symptoms and the location of fibroids

Excessive bleeding. When fibroids are in or near the lining of the uterus, you may have irregular or excessive menstrual bleeding.

Pain. If you feel severe lower belly (pelvic) or abdominal pain and cramps, you may have a fibroid that is growing. Also, fibroids that are attached to the uterus by a thin stem or thread may twist and cause severe pain.

Pressure. If you feel pressure in the pelvis, the fibroid may be pressing on neighboring organs in the lower belly. For example, a fibroid that leans forward on the urinary bladder may make you urinate more often or feel a sense of urgency when urinating. A fibroid that leans backwards on the rectum may cause painful bowel movements, cause hard bowel movements (constipation), hemorrhoids or changes in the shape of your stools.

Causes of uterine fibroids

While the exact cause of uterine fibroids is unknown, there are several possible reasons why they develop:

- **Genetic causes.** Muscle cells in the wall of the uterus may become genetically changed and produce excessive muscle tissue growth.
- **Hormonal causes.** Estrogen and progesterone (produced primarily by your ovaries) may stimulate growth of uterine muscle cells to grow into a fibroid. Fibroids tend to shrink after menopause (when your period stops) due to a decrease in hormone production.
- **Other growth factor causes.** Substances that help the body maintain normal healthy tissues, such as insulin-growth factor, may also influence fibroid growth.

Diagnosis of uterine fibroids

Uterine fibroids are often found during a routine pelvic exam. Your physician may notice changes in the shape or size of the uterus, suggesting the presence of fibroids. Often, your physician may order imaging tests, such as a pelvic ultrasound, to confirm the findings. Your healthcare professional will then help develop a treatment plan that is right for you.

Uterine fibroids and anemia

Due to the heavy bleeding that is experienced with uterine fibroids, there is a possibility that you may be or become anemic meaning that your body does not have enough red blood cells or hemoglobin to function properly. As a result, you may experience many symptoms including fatigue and weakness.

Patients who have even a mild case of anemia before their uterine fibroid surgery are at an increased risk of poor surgical outcomes in the 30 days following their surgery.

What treatments are used in women with uterine fibroids?

If you have no symptoms or if your symptoms are mild and fibroids are small sized, your physician may recommend a careful **“watchful waiting”** approach with regular follow-up visits and repeat ultrasounds.

Otherwise, your physician may suggest you take medicines to **reduce the growth of your fibroids** and/or to **reduce the symptoms** caused by the fibroids. If these treatments are not helpful, your physician may recommend a surgical approach.

Sometimes, a combination of medical and surgical treatments is used.

Treatment options: medicines

Contraceptive pills

Contraceptive pills are often prescribed to treat women with heavy periods and fibroids. This method is effective in reducing menstrual bleeding short-term.

How contraceptive pills work

Oral contraceptives release estrogen and progesterone hormones into the body causing thinning of the lining of the uterus. This may lead to reduced menstrual bleeding.

Side effects of contraceptive pills*

- Headache
- Nausea
- Breast tenderness
- Breakthrough bleeding

* Please consult your healthcare professional regarding other possible side effects.

Progestin therapy

Women with abnormal bleeding associated with uterine fibroids may be prescribed progestin. Progestin is a form of the progesterone hormone that may reduce menstrual blood loss in women with fibroids.

How progestin therapy works

Progestins cause thinning of the lining of the uterus which could potentially lead to reduced menstrual blood loss.

Side effects of progestin therapy*

- Bleeding that may be irregular and unpredictable
- Short bleeding cycles, spotting, or heavy bleeding or no bleeding at all
- Nausea
- Breast tenderness

Selective Progesterone Receptor Modulators (SPRMs)

SPRMs have been shown to reduce the size of fibroids and the uterus, alleviate symptoms and reduce bleeding. SPRMs have also been shown to improve anemia before surgery.

How SPRMs work

The way SPRMs work is still unclear and being studied, however, SPRMs appear to have mixed effects on uterine tissues that are affected by the progesterone hormone.

Side effects of SPRMs*

- Hot flashes
- Fatigue
- Nausea
- Temporary liver enzyme (transaminase) changes
- Endometrial changes

Hormonal Intrauterine system (IUS)

The IUS is a small, T-shaped intrauterine device that is inserted into and left inside the uterus for up to five years at a time, where it releases a progestin hormone. This may be an effective therapy for reducing menstrual bleeding.

How the IUS works

The IUS releases a progestin that causes thinning of the lining of the uterus which could potentially lead to reduced menstrual blood loss.

Side effects of IUS*

- Irregular bleeding or spotting for first 3–6 months
- Breast tenderness
- Headaches
- Nausea
- Depression

Gonadotropin-releasing hormone (GnRH) agonist therapy

A GnRH agonist is a hormone that has been shown to improve anemia, reduce symptoms of fibroids and reduce fibroid volume when used before surgery.

How GnRH agonist therapy works

Treatment with a GnRH agonist leads to a decrease in estrogen levels. These levels tend to be similar to the levels that women have after menopause.

Side effects of GnRH agonist therapy*

- Loss of bone mineral density
- Hot flashes
- Mood swings
- Vaginal dryness
- Smaller breasts
- Headaches

Because of these side effects, GnRH agonists are used only for short periods.

* Please consult your healthcare professional regarding other possible side effects.

Treatment options: surgery

In some cases, when non-invasive approaches do not help, surgery is the best option for treating uterine fibroids. These procedures can vary greatly, from minor to major surgery. Your healthcare professional will discuss the choices for surgery. The size, location and number of fibroids, your desire to have children in the future or keep your uterus are key factors to consider when deciding on the appropriate surgical option for you.

Before undergoing surgery, your physician may prescribe medicines such as GnRH agonists or a SPRM. GnRH agonists and SPRMs have been shown to improve anemia and reduce the size of fibroids before surgery. Talk with your physician about what options are available and appropriate for you.

Myomectomy

This procedure involves removing only the fibroids and leaving the healthy areas of the uterus intact. It may preserve your ability to get pregnant. The procedure can be performed in one of three ways, depending on the size and location of your fibroids.

- **Hysteroscopy.** A thin video telescope is inserted through the vagina to look inside the uterus and to remove the fibroids. Only fibroids that grow into the uterine **cavity** are eligible for this type of myomectomy. Fibroids located **within** the uterine wall cannot be removed with this technique.
- **Laparotomy.** The surgeon removes the fibroids through a cut in the abdomen.
- **Laparoscopy.** The surgeon uses a thin telescope to look inside the pelvic cavity and removes the fibroids using small instruments. This procedure usually involves two small cuts in the abdomen. Sometimes robotic instruments can be used for these operations. This is known as laparoscopic or robotic myomectomy.

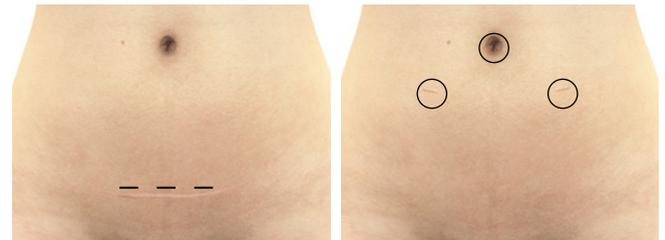
Hysterectomy

Hysterectomy is a major operation involving surgical removal of the uterus.

In severe cases, your physician may also recommend removal of the ovaries and fallopian tubes. If you have not gone through menopause, you may be able to keep your ovaries and fallopian tubes. The ovaries make hormones that help maintain bone density and sexual health even if the uterus is removed.

After a hysterectomy, you can no longer have children. Also, depending on your age, removal of the ovaries can cause menopausal symptoms. Hysterectomy can be performed through an incision in the abdomen (laparotomy), through the vagina or by laparoscopy, which allows for faster recovery.

Incision sites for hysterectomy



Minimally invasive procedures

There are some minimally invasive procedures, such as Uterine Artery Embolization, that can treat your uterine fibroids without actually removing them through surgery.

There's no single best approach to uterine fibroid treatment and often, combined medical or surgical remedies are required, depending on your wishes and symptoms.

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At AbbVie, we believe
that patient support
is an important
part of treatment.

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