Many Women Seek Treatment for Uterine Fibroids in the ER

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ER care for uterine fibroids is costly, so women might better manage their issues with regular visits to a trusted health provider.

Every year, tens of thousands of women turn to the emergency room for uterine fibroid treatment. However, a new study published in the journal Obstetrics & Gynecology suggests that nonemergency health care may better meet their needs, according to a University of Michigan press release.

Uterine fibroids can cause abdominal pain, heavy menstrual bleeding and fertility difficulties, among other symptoms. While noncancerous, these tumors represent a major public health concern because they affect a significant proportion of women worldwide. By age 50, 70% of women will have developed fibroids, but Black women are disproportionately susceptible to the condition.

For the study, researchers from Michigan Medicine reviewed over 487 million visits to the emergency room between 2006 and 2017 by women ages 18 to 55 in the United States. Results showed that although visits to the ER doubled during this period, only 1 in 10 women were admitted to the hospital for fibroid symptoms.

The study specified that admissions for fibroid problems from ER visits decreased from 24% to 11%, and the median cost of such visits increased from $2,586 to $6,193. This means that women with UF may be wasting time, money and health care resources on this manageable condition, scientists observed.

“Fibroids are often a chronic disease, so we have opportunities to treat this through established care with a trusted health provider, yet we’ve seen a big increase in women using the emergency room for fibroid care,” said Erica E. Marsh, MD, the chief of the division of reproductive endocrinology and infertility at the Center for Reproductive Medicine at Michigan Medicine Von Voigtlander Women’s Hospital and a senior study author. “Our study suggests that patients are potentially using the emergency department for care that could and should be obtained in a long-standing trusted environment with a health care provider."

Marsh and colleagues also found that study participants between ages 36 and 45, those with lower

incomes or private insurance and those from the South were more likely to visit the ER for fibroid symptoms. In addition, they noted that women from the Northeast and women who presented with bleeding were more likely to be hospitalized. In contrast, women with fibroid symptoms who did not have health insurance were the least likely to be admitted.

“We should be focused on interventions that improve access to outpatient care for this group of women in order to help mitigate unnecessary, costly ED [emergency department] utilization,” Marsh said. Outpatient imaging, she said, is an example of one such intervention.

Fibroid care is particularly expensive because it often involves imaging studies and other medical tests, according to the study.

For more on coping with a uterine fibroids diagnosis, check out this roundup of relevant organizations and read “6 Tips for Talking to Your Doctor About Uterine Fibroids.” For a personal story about a uterine fibroids diagnosis, read “ER Visits, Heavy Bleeding, Painful Sex, Surgeries and Fertility Issues.”

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