Uterine Fibroid Treatment Options Explored

Most doctors decide how to manage this condition by considering the severity of symptoms and their effects on a woman's quality of life.

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Depending on the circumstances, treatment options for uterine fibroids—benign tumors of muscular tissue—vary. RH encourages women to conduct research, speak to other women with uterine fibroids and discuss with their gynecologists what options may be best for them.

No treatment necessary. if your uterine fibroids don't cause any symptoms or problems, treatment may be unnecessary. For women who experience occasional pain or mild symptoms, however, doctors may suggest over-the-counter or prescription pain medication

Medical therapy. Another non-surgical option for uterine fibroid treatment is prescription medication. These include hormones such as gonadotropin releasing hormone agonists (GnRHa), as well as antihormonal agents such as mifepristone. Hormone treatments offer only temporary relief, however, and may cause menopausal symptoms.

Nonsurgical procedures. These include MR-guided focused ultrasound (MRgFUS) in which ultrasound waves penetrate the abdominal wall, heat fibroid tissue and shrink the tumor. Another procedure is uterine fibroid embolization (UFE), which shrinks fibroids by blocking blood flow to them. With each of these treatments fibroids may return.

Surgical procedures. Options range from minor to major surgery. Endometrial ablation removes the uterus lining to reduce heavy menstrual bleeding primarily caused by submucosal fibroids. (These fibroids expand from the uterine wall into the uterine cavity. This option ends fertility. A myomectomy removes only fibroids; it leaves the uterus—and fertility—intact. The only way to permanently cure uterine fibroids, a hysterectomy also removes the uterus and ends fertility. Hysterectomies also trigger menopausal symptoms.

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