



Lancashire Gynaecologist

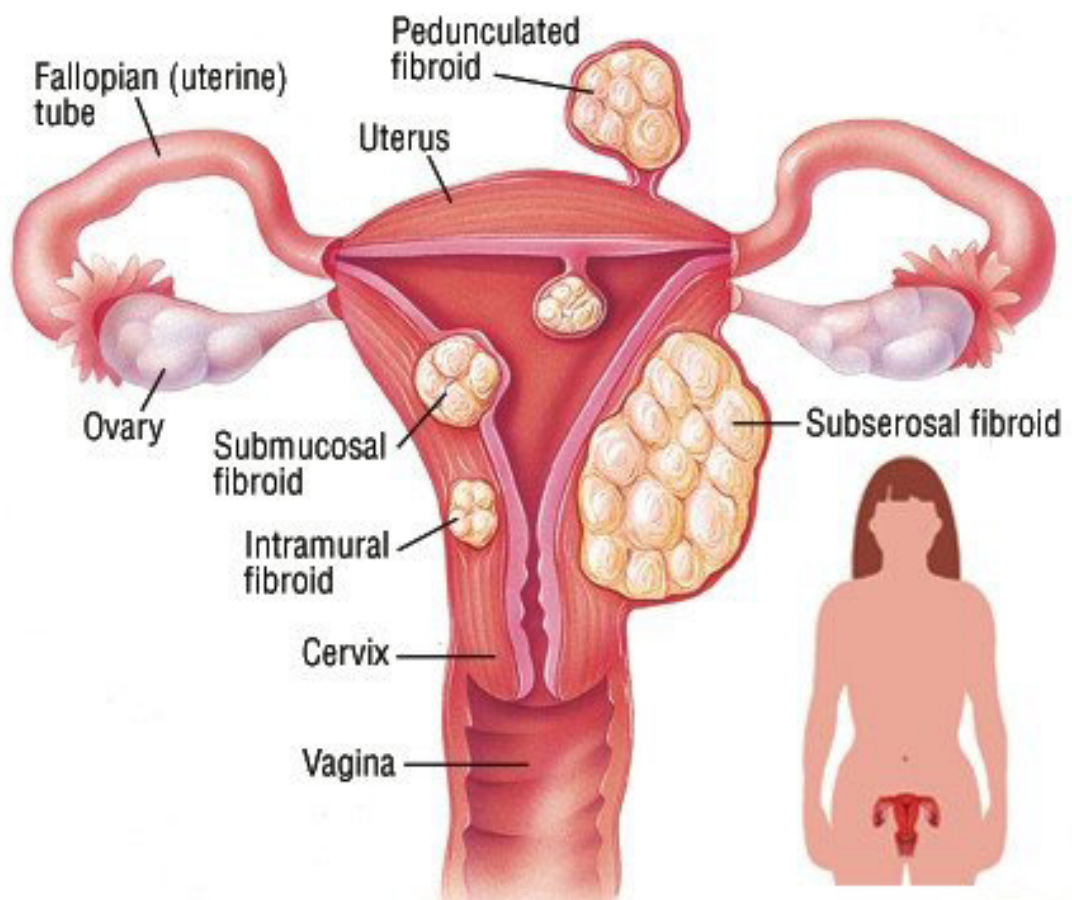
Eric Mutema

Fibroids and Fibroid
Degeneration

Fibroids and Fibroid Degeneration

Fibroids are a common condition. They will occur during a woman's reproductive years when oestrogen levels are at their highest. It's estimated that around 2 in 3 women are affected by fibroids, but in most cases, their impact will be insignificant. Many women have no symptoms, but depending on the number, position, and size, as well as the issues that arise when fibroids begin to degenerate, they can become more serious.

This blog will focus on this last area, fibroid degeneration, including what happens to fibroids during pregnancy. It will cover how fibroids can be treated and managed, but before that, a brief explanation of what fibroids are and why they develop.



Fibroids: what are they and why do they occur?

Fibroids are non-cancerous growths that develop in or around the womb (uterus). They are made up of muscle and fibrous tissue and vary in size.

Their causes are unknown but they are probably linked to oestrogen, the female reproductive hormone produced by the ovaries (the female reproductive organs). That's because fibroids usually develop during a woman's reproductive years (between the ages of 16 - 50) when oestrogen levels are at their highest. They seem to shrink when oestrogen levels are low, such as after menopause when a woman's monthly period stops.

The four main types of fibroids

- 1. Intramural** — Grow inside the muscles of the uterine wall. This is the most common.
- 2. Submucosal** — Protrude underneath the uterine lining and into the uterine cavity. Some women notice heavy bleeding during menstruation and increased abdominal pain from this type of fibroid.
- 3. Subserosal** — Develop outside the wall of the womb into the pelvis and can become very large, putting pressure on the bladder, bowels and abdomen.
- 4. Pedunculated** — Hang by a thin thread or stalk inside or outside the uterus. More likely to cause pain in the abdominal area due to obstruction of the uterus and surrounding organs.

The likelihood of complications occurring depends on additional factors such as the positioning and size of the fibroids.



Fibroid complications

Every woman's experience of fibroids varies. Some will have fibroids the size of a pea, others, the size of a grapefruit. Most will be unaware they have them and won't need treatment because they have no symptoms. After menopause, fibroids will often shrink without treatment.

Others will experience symptoms so uncomfortable that going about their daily life becomes increasingly difficult. If this sounds familiar, or your experience is based on the symptoms below, you should speak to a doctor.

- Heavy or inconsistent menstrual bleeding
- Long-lasting periods
- Abdominal bloating or swelling
- Pelvic pain
- Excessive tiredness
- Difficulty urinating or urinating more often
- Back or leg pain
- Constipation

As fibroids grow, a condition known as fibroid degeneration can occur, causing acute pain that requires intervention.

Fibroid degeneration

Fibroid degeneration happens when one or several fibroids stop receiving the blood supply they need to grow and instead begin to shrink. Whilst this sounds like a positive, it can cause more problems.

When a fibroid becomes too large, the body struggles to provide enough blood and nutrients to sustain its growth. When this occurs, the cells of the fibroid begin to degenerate and die. A degenerating fibroid sounds like a good thing but it's likely to expand and degenerate again, restarting a process of growth and shrinkage. Many women will then experience additional symptoms, like stabbing or chronic pain, fever and heavy bleeding.

Fibroids and pregnancy

A small number of pregnant women have uterine fibroids. If you are pregnant and have fibroids, it's unlikely to cause problems for you or your baby. Sometimes, however, they can lead to problems with the development of the baby or difficulties during labour. Pregnant women may also experience tummy pain and there's an increased risk of premature labour. In very rare cases, large fibroids can block the vagina, so a caesarean section may be necessary.

When fibroid degeneration occurs during pregnancy it is known as necrobiosis, with abnormal bleeding and severe abdominal pain as the two main symptoms. This is frightening so you should see a doctor immediately but in most cases painkillers, rest and heat pads can alleviate pain.



Treatment options

Fibroids may not be life-threatening, but they can severely impact your life. The negative effects can be physical and emotional, only worsening the longer you have them. A range of treatment options are available but these will depend on the type, location and size of the fibroids. These range from painkillers, fibroid shrinking medication, and hormone treatment to more invasive procedures to remove them. The most important thing to do is to not suffer and talk to a gynaecologist who specialises in women's reproductive health.

Mr Eric Mutema
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Talk to the Lancashire Gynaecologist

Mr Eric Mutema is a highly experienced and respected Consultant Obstetrician and Gynaecologist who is a consultant at the Blackpool Teaching Hospital NHS Trust.

His private practice, the Lancashire Gynaecologist offers specialist gynaecological services such as general obstetrics and gynaecology patient care. He also treats a range of conditions including reproductive and menstrual health, fertility advice, menopause and routine procedures like coil fitting and removal.

The Lancashire Gynaecologist practice offers patients individual attention, an empathetic, compassionate approach together with patient-centred care. This includes a full consultation taking overall health into account and any subsequent treatments will be tailored to meet the needs of the individual woman. So please don't wait and put off seeking treatment, we are here to help you.



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