



WOMEN'S HEALTH

A Nonsurgical Option For Fibroids

(NAPSA)—Doctors have good news for women with a common medical condition. Whereas once the only option was surgery, a less drastic solution may help sufferers of uterine fibroids.

Uterine fibroids are the most common benign tumors within the female reproductive system. While the majority of uterine fibroids are diagnosed and treated in women between the ages of 35 and 54, fibroids can and do occur in women under the age of 35, even as young as the early 20s. Clinical studies also note that African-American women are especially susceptible to developing uterine fibroids.

More than 600,000 women undergo hysterectomies in the United States each year, but some doctors believe that many women do not need this drastic operation. In fact, according to medical studies, nearly 90 percent of hysterectomies are performed for benign reasons.

“Women should be made aware of all available options for treating their uterine fibroids,” says Dr. James Benenati of Baptist Cardiac & Vascular Institute in Florida. “Hysterectomy is a major surgery—it’s not an easy procedure. So, it shouldn’t be the first treatment that is recommended to a patient after medical management.”

A hysterectomy is the complete removal of the uterus, which requires general anesthesia, up to



Doctors now have a proven alternative to treat fibroids with long-term relief.

four days of hospitalization and usually takes five to six weeks to recover. Hysterectomy may also be associated with potential physical, emotional and sexual complications and compromises any chance for future pregnancy.

Fortunately, doctors say there’s a better way. Numerous studies confirm the efficacy and safety of uterine fibroid embolization (UFE) as an alternative treatment option to hysterectomy. It’s a safe, effective and proven treatment for symptomatic fibroids and an alternative to the more invasive hysterectomy. During a UFE procedure, the interventional radiologist (IR) injects tiny particles into blood vessels to block the blood supply and shrink the fibroids. The procedure is performed in about an hour and does not

require general anesthesia. For many women, it’s been a welcome alternative to hysterectomy.

Results of a recent five-year study reveal that more than 70 percent of women experienced significant long-term relief after UFE. Additionally, because UFE maintains the uterus, there is still a possibility of pregnancy after UFE, as studies have shown that women can get pregnant after the procedure and have successful term deliveries.

“I didn’t want to have a hysterectomy because of the long recovery time and because of the immediate menopause changes my body would have to go through,” says Pamela Smith of Miami, a patient treated by Dr. Benenati. “I’m happy that I decided on the UFE procedure—it was not very painful. I recovered quickly and my symptoms have been eliminated. I finally got my life back.”

Furthermore, the American College of Obstetricians and Gynecologists (ACOG) includes UFE as a treatment option for uterine fibroids in its brochure. ACOG describes the procedure, reviews some of the complications, especially for older women, and advises that women should discuss with their physician if UFE is for them.

To locate an IR who performs UFE, go to www.ask4ufe.com or call 877-ASK-4UFE. If treatment is necessary, talk to an IR to see if UFE is the right choice for you.