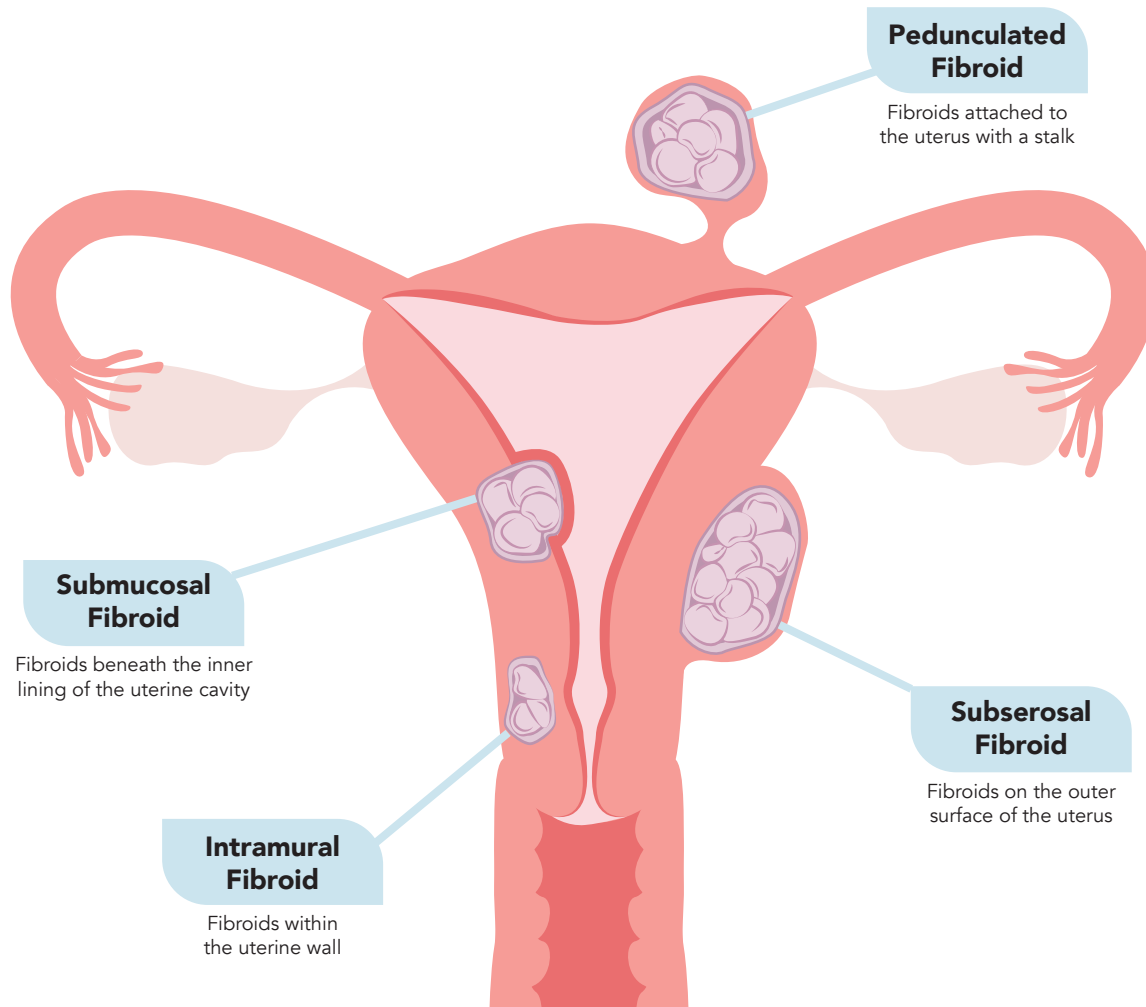


Fibroids are benign tumors (not cancerous) of the smooth muscle of the uterus. Up to 70% of women have fibroids. Some fibroids are small and people don't even know they have them because they have no symptoms. Other fibroids can cause significant symptoms.

There are four different types of fibroids depending on their location.



Symptoms of Fibroids

Symptoms of fibroids can vary depending on the number, type, location and size of the fibroids.

- **Abnormal Uterine Bleeding** – change in flow and duration of menstrual period
- **Bulk Symptoms** – bigger or multiple fibroids can put pressure on bowels and/or urinary bladder causing pelvic pain and pressure sensation, discomfort, constipation, difficulty with urination, and painful intercourse
- **Fertility and Pregnancy-Related Concerns**

Fertility- and Pregnancy-Related Concerns

Fertility Concerns

Infertility – Depending on the size and location of fibroids, some fibroids can distort the uterine cavity and ultimately lead to difficulties getting pregnant.

Miscarriage – When fibroids distort the uterine cavity, there can be instances where it is more challenging for a pregnancy to continue. On occasion, this may result in a miscarriage that most commonly takes place in the first trimester.

Examples of Pregnancy Concerns

Malpresentation of a Fetus – Most babies are positioned vertex (“head down”) closer to the due date, which is an ideal position for vaginal delivery. However, depending on the size and location of a fibroid, it can interfere with a baby’s positioning inside the uterus. Caesarean section may be required for delivery.

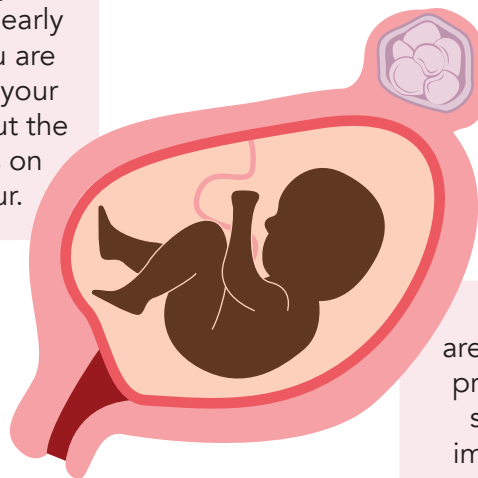
Preterm Labour – Going into labour before 37 weeks is considered preterm (early). Depending on the size and location, fibroids can contribute to preterm labour.

Labour Dystocia – Larger fibroids that are located in the lower part of the uterus can impede the baby’s passage through the birth canal.

Postpartum Hemorrhage – Fibroids found within the uterine wall can prevent the uterus from contracting appropriately after delivery, therefore contributing to excessive bleeding immediately after giving birth.

Pain – As pregnancy progresses, the uterus grows and the architecture of the uterine wall changes, causing decreased blood flow to fibroids. Without blood supply, fibroids can degenerate causing local inflammation and pain. This is more common in the second and third trimester.

Not all fibroids are cause for concern in pregnancy. Many are found, by chance, during an early pregnancy ultrasound. If you are pregnant and have fibroids, your doctor will speak to you about the potential impact of fibroids on your pregnancy and labour.



If you have fibroids and are having difficulty getting pregnant, your doctor will speak to you about the impact of your fibroids on your fertility. It is possible your doctor will recommend removing your fibroid(s).

References

1. De La Cruz MS, Buchanan EM. Uterine Fibroids: Diagnosis and Treatment. Am Fam Physician. 2017 Jan; 95(2):100-107.
2. Lee HJ, Norwitz ER, Shaw J. Contemporary management of fibroids in pregnancy. Rev Obstet Gynecol. 2010; 3(1):20-27.

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