If you are reading this, you have probably been diagnosed with one or more uterine fibroids. These are benign (non-cancerous) growths in or on your womb. They may cause severe period pain or heavy periods, as well as abdominal pain or a feeling of pressure in the abdomen. Some fibroids may also affect fertility.

There are various treatment options for uterine fibroids. Your doctor may also have advised you to have surgery to remove your fibroids or the entire womb.

The aim of this decision aid is to help you choose a suitable treatment together with your doctors.

**THese are the treatment options:**

**Medication**
- Hormone therapy: This mainly includes hormonal contraception and hormones that inhibit the production of estrogen (GnRH analogues).
- Uterine artery embolization (also known as fibroid embolization): This blocks the blood vessels that supply the fibroid.

**Surgery**
- Removal of the fibroids (myomectomy)
- Removal of the womb (hysterectomy)

Other treatments include focused ultrasound surgery (FUS). This involves using ultrasound waves to heat and destroy fibroids. There is a lack of research on the pros and cons of this approach. Painkillers may be used for a while to relieve acute symptoms. There is no scientific proof that other treatments, such as natural remedies, work.

**Personal decision**
This brief decision aid probably won’t include all of the information that you need. You will still need to talk to a doctor, but the decision aid can help you. Your treatment decision will depend on various things, including:
- which symptoms the treatment should improve,
- how many fibroids you have, how big they are, and where they are,
- how old you are,
- whether you wish to have any (more) children,
- how effective non-surgical treatments are,
- whether you would like to keep your womb and
- whether you have any other medical conditions.

**IMPORTANT:**
Don’t let anyone pressure you into choosing a certain treatment! Even if you find the symptoms very distressing, take the time to gather information and make the right decision for you.
## PROS AND CONS OF HORMONE THERAPY

<table>
<thead>
<tr>
<th></th>
<th>Birth control pills</th>
<th>Hormonal coils (IUDs)</th>
<th>GnRH analogues</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What does the treatment involve?</strong></td>
<td>Birth control pills are taken once a day. Either with a monthly break or continuously (without a break).</td>
<td>The hormonal coil is placed inside the womb, and can be left there for 3 to 5 years.</td>
<td>Hormone injections, given every 1 or 3 months. Only suitable for short-term treatment (up to 6 months), usually before surgery.</td>
</tr>
<tr>
<td><strong>Does it help?</strong></td>
<td>Can reduce heavy menstrual bleeding and prevent anemia. There's no good-quality research on whether they relieve fibroid-related pain and cramping.</td>
<td>Can reduce heavy menstrual bleeding and prevent anemia. Doesn't affect symptoms caused by fibroids.</td>
<td>Can reduce heavy menstrual bleeding, the fibroids may shrink. Smaller fibroids can be removed using gentler surgical procedures. Fibroids grow again after treatment. Fibroid symptoms usually return too.</td>
</tr>
<tr>
<td><strong>What are the possible side effects?</strong></td>
<td>Fluid retention (edema), headaches, breast tenderness, higher risk of thrombosis.</td>
<td>Acne, spotting (vaginal bleeding between periods), mood swings and breast tenderness.</td>
<td>Hot flashes, sweating or vaginal infections.</td>
</tr>
<tr>
<td><strong>Who is the treatment suitable for?</strong></td>
<td>For women who don’t currently wish to become pregnant.</td>
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Uterine artery (fibroid) embolization: Surgery to remove fibroids (myomectomy) or surgery to remove the womb (hysterectomy)

What does the treatment involve?

In uterine artery embolization, a catheter is inserted into an artery in the groin and gently pushed through to the fibroid using x-rays to guide the way. The blood flow to the fibroid is then blocked in order to shrink the fibroid.

The fibroids are surgically removed through a cut in the abdominal wall or through the vagina. The womb is not removed.

The womb is removed through a cut in the abdominal wall or through the vagina.

Does it help?

The symptoms improve in about 80 to 90 out of 100 women. This improvement is sometimes only temporary: in around 20 out of 100 women the procedure is repeated within a few years.

The symptoms improve in about 90 out of 100 women. But fibroids may grow back and symptoms may return (in up to 20 out of 100 women).

Women no longer have fibroid symptoms after this surgery.

What are the possible side effects?

Pain, injury to blood vessels, inflammations, detached fibroid passing out of vagina, reduced fertility. Recovery is probably faster than after surgery to remove the fibroids or womb.

Injury to abdominal organs or other complications (in about 5 out of 100 operations). General risks associated with surgery, such as infections or wound-healing problems.

Injury to abdominal organs or other complications (in about 5 out of 100 operations). General risks associated with surgery, such as infections or wound-healing problems.

Could I still have children after the treatment?

Yes, but you may be less fertile.

Yes.

No.

Who is the treatment suitable for?

For women with certain types of fibroids as an alternative to myomectomy (fibroid removal) or hysterectomy (womb removal). Usually only for women who don’t wish to have any (more) children.

For most women who have fibroids. If the fibroids are very large or there are a lot of them, this type of surgery may not be possible.

For women who don’t wish to have any (more) children. For women who have a lot of large fibroids that cannot be treated in any other way.

## PROS AND CONS OF THE DIFFERENT PROCEDURES

<table>
<thead>
<tr>
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HELP WITH YOUR DECISION
You may still be unsure about which treatment you would prefer. You can write down your thoughts and questions on the following two pages.

<table>
<thead>
<tr>
<th>Which treatment would I consider?</th>
<th>What do I like about it?</th>
<th>What don’t I like about it?</th>
</tr>
</thead>
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<td>Hormone therapy</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>No treatment</td>
<td></td>
<td></td>
</tr>
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</table>

If you still aren’t sure, what else do you need in order to make a decision?
With all the different pros and cons to consider, it can be hard to choose a treatment. One advantage of medications is that they may make it possible to avoid surgery. If they don’t help, surgery is still an option.

If you need more help:

- You will find links to further information on the next page.
- You can talk to your doctor again.
- You can also talk to a different doctor. You will find information about this option on the next page, too.
- You can talk about it with your friends and family.
- You can contact a patient information center or a support group.
You will find in-depth information about the following topics on the internet:

- Uterine fibroids and the treatment options: www.informedhealth.org/fibroids

Preparing for the doctor’s appointment

Do you still have any questions? What are you most concerned about? Write down any questions or thoughts you may have, and take this decision aid with you to the appointment. You can ask the doctor about anything you would like to know or discuss anything you are worried about.

You will find a list of questions – and can choose those that are most important to you – here:

- www.informedhealth.org/questions
Uterine fibroids:
What are my treatment options?

Publishing details
This decision aid was developed by the Institute for Quality and Efficiency in Health Care (IQWiG, Germany). You will find information about our work and the sources we use here:

- [www.informedhealth.org/our-approach](http://www.informedhealth.org/our-approach)

Last updated: 03/2020