

Profiles, impacts and management of uterine fibroid in an Algerian maternity

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Introduction

Uterine fibroids also known as myomas or leiomyomas are benign monoclonal smooth muscle tumors of the uterus, this frequent pathology represent the most common gynecologic tumor increases in women between 40 and 50 years old increase until menopause, at which point existing lesions and symptoms regress, they can be single or multiple, large (bigger than 10 cm) or small.

Methodology

Aim:

Our study aims to evaluate the epidemiological and clinical aspects, consequences and treatments of uterine fibroids. dd your information, graphs and images to this section.

Materials and methods:

Retrospective study of 34 patients treated for uterine fibroids in our Obstetrics Gynecology department over a period of 6 months from January 1, 2021 to June 1, 2021

Results

Leiomyomas represented 28% of all gynecological pathologies treated during the study period. The extreme ages for all of our patients were between 24 and 65 years with a peak in frequency between 45 and 55 years, The average length of hospital stay for our patients was 11 days. Nulliparity was noted in 42.3% of cases, while primary infertility was associated with uterine fibroids in 10.5% of cases. Symptoms were dominated by uterine hemorrhages (68.4%), pelvic pain (46.2%), and bladder disorders (16.6%). Surgery was indicated mainly for large fibroids (46.15%), large polymyomatous uteri (26.33%) and persistence of symptoms after well-conducted medical treatment in 24.23%. Conservative treatment (myomectomy) was performed in 52.1% of cases and radical treatment (hysterectomy) in 48.9% of cases.

Discussion

Many women are asymptomatic. When symptoms do occur, they may be related to excess bleeding or to size and location of lesions and may include dysmenorrhea, metrorrhagia, menorrhagia, dyspareunia, bladder dysfunction (urinary frequency, incontinence, or retention), pelvic pain, and constipation.

Reproductive effects may include infertility, recurrent miscarriage, premature birth, abnormal presentation and intrauterine growth restriction.

Therapy is generally indicated only for symptomatic fibroids, including infertility, when they are considered to play a significant role

When treatment of symptomatic fibroids is decide, tailor the approach to the nature of symptoms (bleeding, bulk, or both); number, location, and size of fibroids; and patient's reproductive plans Hysterectomy is the definitive treatment, but it carries inherent surgical risks and is not suitable for women who wish to preserve childbearing potential

Less invasive measures include myomectomy, uterine artery embolization, ablation with high-frequency ultrasonography, and other less common techniques. These measures, generally, are quite effective in relieving symptoms caused by bleeding or size while retaining fertility Pharmacologic therapy is indicated for urgent control of severe bleeding, to reduce fibroid size and correct anemia before surgical intervention, and as a bridge to anticipated menopause and decline in fibroid size

Important menstrual bleeding can be controlled with NSAIDs, tranexamic acid, hormonal contraceptives, or gonadotropin-releasing hormone antagonists, but these have no effect on fibroid size.

Gonadotropin-releasing hormone agonists and selective progesterone receptor modulators can be used to reduce size and bulk as well as to diminish bleeding.

Size and symptoms of fibroids regress after menopause. The treatment has developed a lot and presents several alternatives, which make it possible to avoid ablation surgery in favor of conservative surgery. Endoscopic resection techniques have revolutionized the management of uterine fibroid: hysteroscopy for fibroid type 0-1 and 2 and laparoscopy for interstitial fibroids of moderate size. However, hysterectomy remains indicated for patients who do not wish to become pregnant or after failure of other therapies.

Conclusion

Uterine fibroid remains a frequent reason for consultation, particularly due to its symptoms. A de-escalation in its therapeutic care has been observed in recent years

