

# Get care to live a HEALTHIER FUTURE with uterine fibroids.



## What are uterine fibroids?

Uterine fibroids, also called leiomyomas or myomas, are benign (noncancerous) growths that develop from the muscle layer of the uterus/womb. They are the most common type of growth found in the pelvis of a person with a uterus. Fibroids can vary in size or stay the same size over time.

## What are the symptoms?

### Changes in menstruation (period)

- Heavy bleeding during period.
- A heavy period that lasts more than seven days.
- Vaginal bleeding between periods.
- Painful periods.

### Fullness or pressure

- Feeling “full” in the lower abdomen (belly).
- An urge to urinate more often or difficulty urinating.
- Difficulty passing stool.

### Pain during sex or in the belly/lower back

### Reproductive problems, including infertility and recurrent miscarriages

## What causes fibroids?

Researchers think that more than one factor could play a role. Because no one knows for sure what causes fibroids, we also don't know how to prevent them. We do know that they are under hormonal control from both estrogens and progestins. Fibroids can grow rapidly during pregnancy when hormone levels are high. They shrink when anti-hormone medication is used. They also stop growing or shrink once a woman reaches menopause.

## What are the risk factors?

### Race/ethnic origin

- Fibroids are 2-3 times more common in Black people than White people.

### Age

- Risk of fibroids increases with age and peaks at around age 50. In many women, fibroids may shrink after menopause.
- Black women tend to experience fibroids earlier in life than White women and other women of color.

## Family history or genetics

- Having a family member (such as a mother, sister or aunt) with fibroids increases your risk.

**High blood pressure has been found to be associated with an increased risk of fibroids.**

## How do I know if I have fibroids?

If you are experiencing any symptoms, reach out to your health care provider. A health care provider may find fibroids during a pelvic exam. Your provider may also order imaging tests to see a picture of your uterus to see if fibroids are present.

## How are they treated?

Most people with fibroids do not have symptoms. If you have fibroids but do not have symptoms, you may not need medical intervention. Your provider can check during regular exams to see if your fibroids have grown and ask you whether you have noticed any new or worsening symptoms. Your provider may recommend an imaging test to check growth or change in size.

**If you do have symptoms**, your health care provider will consider:

- The symptoms you have and their severity.
- If you want to get pregnant in the future.
- The size of the fibroids.
- The location of the fibroids.
- Your age and how close you are to the onset of menopause.

**If you have bulk symptoms or bleeding/pain** that is not responsive to medication, your provider may recommend surgical options like:

- Myomectomy
- Hysterectomy
- Fibroid ablation

For nonsurgical options, a radiologist may be able to perform a uterine fibroid embolization (UFE) or uterine artery embolization (UAE).

Everyone's experience with uterine fibroids is unique, so every treatment plan is unique. If you're concerned you have fibroids (or know that you have fibroids or unaddressed symptoms) speak with your health care provider so you can make the decision that is best for you. Visit [Michigan.gov/MIH](https://www.michigan.gov/MIH).

Sources:

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Uterine Fibroids | The American College of Obstetricians and Gynecologists (ACOG)

Office on Women's Health (OWH) Uterine Fibroids Factsheet.pdf

Uterine Fibroids | Office on Women's Health (womenshealth.gov)