Women with uterine fibroids can opt for minimally invasive treatments

By the time they are 50, eight in 10 women develop uterine fibroids (growths in and around the uterus) which are non-cancerous, but can cause discomfort including heavy and painful menstrual cycles.
Rather than go through invasive surgeries to remove large portions of their uterus or have it taken out completely, many women sometimes choose to bear with the symptoms.

But at a public forum recently organised by the Academy of Medicine and the College of Radiologists, they learnt that they can also opt for minimally invasive procedures.

Recent improvements in medication, keyhole surgery and uterine fibroid embolisation (UFE) - where a needle injects tiny particles to block the blood supply to the fibroid - mean a major procedure may not be needed.

The forum at the Lifelong Learning Institute in Geylang featured Dr Luke Toh, head of interventional services at the KK Women's and Children's Hospital (KKH); Dr Celene Hui, an associate consultant at the division of obstetrics and gynaecology at KKH; and Dr Kristen Lee, an associate consultant at the department of vascular and interventional radiology at Singapore General Hospital.

Dr Toh told The Straits Times that as patient autonomy increases, they must be made aware of the healthcare options available.

The options depend on a patient's condition.

Dr Hui said: "Treatments must be individualised to take into account the patient's ideas, concerns and expectations, the severity of her symptoms, as well as the location, size and number of the fibroids."

While open surgical operations are suitable for very large or multiple fibroids, minimally invasive treatments such as keyhole surgery may alleviate symptoms and provide faster recovery.

Both hormonal and non-hormonal medications may help those who do not wish to undergo surgery.

Dr Hui said: "The choice is ultimately a shared decision between the patient and her healthcare provider."

UFE treatment has gained popularity here.

It requires a small incision where a tube is guided into a patient's artery. From there, surgeons inject embolising agents (such as microspheres) that can cut off the blood flow to the patient's uterine fibroids, shrinking them significantly.

Dr Lee encouraged women to involve their doctors as an integral part of their treatment.

"Sixty per cent of people surveyed in the United States have never heard of embolisation; referring clinicians may not be familiar with it. That's why it's important for patients to broach the topic and discuss how it may be suitable for them," she added.

Ms Sandy Goh, a 45-year-old managing director who suffered for over 10 years from severe symptoms due to her fibroids, said: "I almost gave up in treating my fibroids until I attended last year's panel on the same topic."

After doing research and consulting a doctor, she decided on the UFE procedure.

"I had the procedure in December and my symptoms are much better."