

## Radiology

# Uterine Fibroid Embolisation

## Important information about your interventional procedure and recovery

### What are Uterine Fibroids?

Uterine fibroids are non-cancerous growths of the uterus that often appear during childbearing years. Uterine fibroids (also known as Leiomyomas or myomas), range in size from seedlings, to bulky masses that can distort and enlarge the uterus. You can have a single fibroid or multiple. Many women will have uterine fibroids in their lifetime and you might not know because they often cause no symptoms. On average 1 in 3 women with uterine fibroids may experience 1 or more of the following symptoms:

- Heavy Bleeding (heavier or more painful periods)
- Lower abdominal (stomach) pain and / or Lower back pain
- Constipation / Bloating
- Frequent need to urinate
- Pain or discomfort during sex

Embolisation is a minimally invasive procedure used to treat fibroids through the use of tiny particles that block the arteries that supply blood to the fibroids in the uterus in the hope to relieve symptoms. This is performed in hospital by an Interventional Radiologist, a doctor who is specially trained to perform this type of specialised procedure.

### Preparation for the Procedure

You must attend a pre-assessment at the x-ray department on the date given in the letter accompanying this information. At pre-assessment the radiology nurse will take a brief medical history and take some blood for routine tests. You will have the opportunity to discuss any questions or concerns you have regarding the procedure with the Interventional Radiologist. Please bring a record of all medication you usually take, including homeopathic preparations.

Uterine Fibroid Embolisation can be performed as a day case and depending on pain management you will be discharged the same day, in the unlikely event you need to stay in hospital overnight to manage your pain please bring an overnight bag. You will need to arrange for someone to collect you from the hospital after your procedure as you are not allowed to drive for 48 hours post procedure.

## Staff who will be present

There is a multidisciplinary team that you will encounter during your stay with us. These include:

- Interventional Radiologist (This is a Dr that specialises in Xrays and minimally invasive procedures )
- Nursing team – they will look after you prior to procedure during and post procedure. The radiology nurses also assist the Radiologist during the procedure
- Radiographers- Handle the specialist xray equipment and assist the team during the procedure

## On the Day & What to Expect

Please report to the main X-ray department at Huddersfield Royal Infirmary for admission to our Radiology Day Case Unit. The x-ray department is located on the lower ground floor of the main hospital building.

You may eat a light breakfast on the morning of your procedure, unless advised otherwise at pre-assessment.

Please take all your usual medication as normal, unless informed otherwise at your pre-assessment.

Please bring all your medication with you when you come into hospital.

On arrival to the day case unit you will be changed into a gown, have a cannula inserted to be able to administer antibiotics and medications. Your last menstrual period will be checked and we will ask you to complete a lifestyle questionnaire.

Once ready to start the procedure you will be given some local anaesthetic in the wrist so a tiny tube called a catheter can be inserted giving the doctor access to the uterine arteries. The catheter is then guided into the uterine artery and with the use of contrast (x-ray dye) we are able to take pictures to see which arteries are feeding the fibroids. Microscopic particles are then pushed down the catheter tube into the fibroids to cut off their blood supply. This is then repeated on the other side of the fibroid using the same access point. In theory the fibroids begin to cut off blood supply without damaging the uterus and ovaries.

The procedure on average can take anywhere between 1.5 - 3 hours depending on the complexity of the case. During the procedure you are conscious but sedated to help minimise your pain throughout. Once the procedure is complete you will be returned to the day case for recovery where over the following hours you will be observed by the nurses to monitor your observations and pain management.

Due to using radial access (entry through the wrist) a closure band will be placed on small puncture site in your wrist to prevent bleeding. Using this you are able to be ambulatory straight after your procedure as long as you're feeling well enough. In some cases the artery at the top of the leg (femoral artery) will need to be used and the recovery is slightly different, however this will be discussed with you at your pre-assessment & before the procedure when you go through the consent form with the doctor. Please note on the day of your procedure it may not always be the same doctor who you saw for your pre-assessment.

## Side Effects & Risks of the Procedure

Fibroid embolisation is considered to be very safe with complications occurring in fewer than 3% of patients. Most patients experience moderate to severe pain and cramping in the first several hours. Symptoms you may experience during your recovery period. Most women only experience one or two of these symptoms:

- Prolonged or heavy periods
- Tiredness
- Night sweats
- Feeling bloated
- Discharge of fibroid debris resulting in heavy bleeding with clots
- Constipation
- Low appetite
- Bruising on the wrist or around the small catheter wound

A few women suffer from infection after embolisation. You should contact us immediately in cases of increasing pelvic pain, fever (temperature greater than 38.5°C), vaginal discharge of pus, heavy bleeding or expulsion of fibroid.

Whilst the majority of patients who have fibroid embolisation are finished with childbearing, it appears that the procedure may cause a loss of menstrual cycles (premature menopause) in a very small number of patients. If this happens this would result in infertility.

Before you are discharged from the day case you will be given painkillers to take at home. You may experience cramp like pain and feel generally quite tired over the next few days. Initial recovery will take 2 - 7 days. You should expect to take approximately 1 week to 10 days off work; you will know how you are feeling.

A member of the Radiology nursing team will contact you the following day after your procedure for a well-being check to see how you are feeling.

You will receive a follow-up clinic appointment through the post with your referring Doctor.

**If you experiencing any problems post procedure, please contact:**

**Monday to Friday 8am to 5pm**

**Radiology Day Case 01484 355 781**

**If you cannot wait till the next working day visit your nearest Emergency Department and explain what procedure to have done.**

## Further Information

If you have any questions about your treatment prior to your procedure please call:

**The X-ray Department  
on 01484 355590 (Mon- Fri 8am- 5pm)  
ask to speak to a member of the Vascular Team.**

(If we are busy we may need to take your number and call you back. Which could either be later that same day or the following day).

## For further information online:

British Society of Interventional Radiology: Fibroids [www.bsir.org/patients/fibroids/](http://www.bsir.org/patients/fibroids/)

Femisa – Patient Fibroid Embolisation: Information, Support & Advice. [www.femisa.org.uk/index.php/about-fibroids](http://www.femisa.org.uk/index.php/about-fibroids)

Royal College of Obstetricians & Gynaecologists Clinical recommendations on the use of uterine artery ([rcog.org.uk](http://rcog.org.uk))

## Further information about Interventional Procedures can be found:

<https://wyaat.wyhpартnership.co.uk/our-priorities/west-yorkshire-vascular-services>

<https://www.bsir.org/patients/>

This leaflet has been prepared with the British Society of Interventional Radiology (BSIR) with the Clinical Radiology Patients' Liaison Group (CRP.LG) of The Royal College of Radiologists and edited accordingly by Calderdale & Huddersfield Trust

## If you have any comments about this leaflet or the service you have received you can contact :

Radiology Day Case  
Huddersfield Royal Infirmary

Telephone: 01484 355781

[www.cht.nhs.uk](http://www.cht.nhs.uk)

## If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

ਬ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਵੇਰ ਪ੍ਰਾਚੂਪ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ,  
ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو یہ معلومات کسی اور فارمیٹ یا زبان میں درکار ہوں، تو  
برائے مہربانی مندرجہ بالا شعبے میں ہم سے رابطہ کریں۔

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المذكور أعلاه"