



women's health

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UMHS Women's Health Program—Dedicated to the health and wellness of women

UTERINE FIBROIDS

Fighting Fibroids

Chances are you know someone who has uterine fibroids, even if she doesn't know she does. These tumors of fibrous tissue and smooth muscle are the most common benign tumors seen in gynecology. They range in size from less than 1 inch to more than 8 inches. Estimates suggest that 30 to 50 percent of women in the United States have them, but studies indicate that many more women have them and don't have any symptoms. Although the cause is unknown, African-American women (1 in 2) are more likely than Caucasian women (1 in 4) to have uterine fibroids.

Possible Symptoms

Fibroid tumors can cause a variety of symptoms including pelvic pain and pressure on the bladder, which may cause increased urinary frequency. Abnormal uterine bleeding (including heavy menstrual periods and bleeding between periods) is also a common symptom. Sometimes fibroids cause pain during intercourse.

Uterine fibroids may also be associated with infertility and miscarriages.

Diagnosis

Uterine fibroids are usually diagnosed during a pelvic exam. Additional tests and studies like ultrasounds, CT (computerized tomography) scans, or magnetic resonance imaging (MRIs) can confirm the diagnosis. The University of Michigan offers a number of non-invasive and minimally invasive procedures to diagnose and treat fibroids.

Treatments

Fibroids are the reason for 30 percent of the hysterectomies in the United States, but there are other options. The University of Michigan Health System Department of Obstetrics and Gynecology provides many options (ranging from medication to surgery). (For more information turn to page 2.)

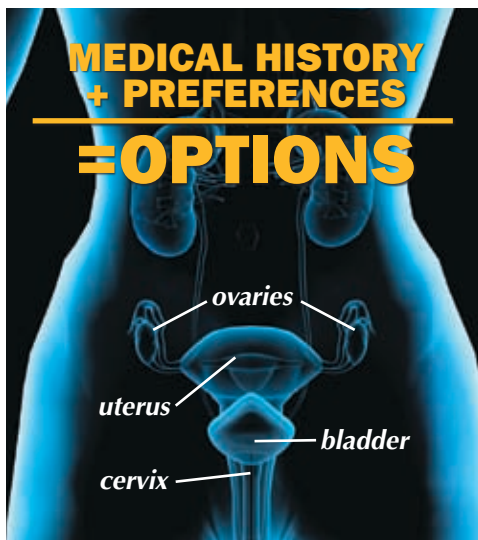
"There are a wide range of options depending on each individual's needs. We balance what is available to that person medically with her personal preferences. We work with each patient as a team to find the right choice, strongly respecting her needs and desires for fertility and recovery time," says Suzie As-Sanie, Clinical Lecturer, Department of Obstetrics and Gynecology, UMHS.

Contact the University of Michigan Department of Obstetrics and Gynecology at (734) 763-6295 or visit <http://www.med.umich.edu/obgyn/index.htm> for more information.



“We make patients aware of each option and present the ones that are appropriate for each individual in order to come up with the best plan of care.”

—Arleen Song, M.D., M.P.H.



Each woman’s medical situation and personal preferences will help determine which options are appropriate for her.

Hysteroscopy is a procedure involving the placement of a small telescope through the cervix and into the uterine cavity. Hysteroscopy can discover the cause of bleeding, such as polyps or fibroids. A diagnostic hysteroscopy using a thin and flexible scope, can usually be done in the office with little or no discomfort. UMHS offers an outpatient office hysteroscopy clinic. More complex operative hysteroscopies (to remove large polyps or fibroids) are done in the operating room under anesthesia.

Myomectomy is the removal of fibroid tumors from the uterus. The size and location of the fibroids will determine the type of myomectomy (laparoscopic, hysteroscopic or abdominal). For patients who are candidates

for laparoscopy or hysteroscopy, this surgical approach allows a woman to avoid a large incision on her stomach.

A **da Vinci®-assisted laparoscopic myomectomy** is a robot-assisted surgical procedure that involves slender telescope-like instruments that can be placed through small incisions to remove fibroid tumors from the uterus. Robot-assisted surgery allows your surgeon to perform a precise, proper repair of the uterus through a minimally invasive approach.

An **endometrial ablation** is a procedure performed through the cervix which permanently removes the lining of the uterus (endometrium) by electrocautery, laser or heat energy.

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Minimally Invasive Surgery Program offers alternatives to traditional surgeries

The University of Michigan Health System (UMHS) Department of Obstetrics and Gynecology provides women with many options in diagnosing and treating abnormal uterine bleeding, including the Minimally Invasive Surgery Program (MISP). This program offers a number of procedures that may allow women to avoid large abdominal incisions, anesthesia, and/or spending the night in the hospital.

All of the procedures UMHS offers are not an option for every woman. Each patient's medical history, needs and preferences help determine the treatment. "We make patients aware of each option and present the ones that are appropriate for each individual in order to come up with the best plan of care," says Arleen Song, M.D., M.P.H., assistant professor, department of obstetrics and gynecology. Song is one of the three faculty in MISP. The faculty also includes Arnold Advincola, M.D., and Suzie As-Sanie, M.D., M.P.H. "Our group has a wide range of therapeutic options to offer—both medical and surgical," says Song.



Arleen Song, M.D., M.P.H.

What's Offered?

UMHS offers laparoscopic techniques, hysteroscopies, endometrial ablation and myomectomies (see definitions on page 2). The MISP is a leader in using da Vinci®-assisted laparoscopic myomectomy. In 2001, UMHS was among the first centers in

the United States to utilize robotic technology for gynecological surgery. This type of surgery is not offered widely in the region or even nationally, and UMHS continues to be a leader in the number of procedures performed because of the experience of Dr. Advincola, Dr. As-Sanie and Dr. Song. Da Vinci® myomectomy is one option, but laparoscopic hysterectomy is another good option for some women. For the laparoscopic hysterectomy, UMHS offers either a total laparoscopic hysterectomy (removal of the uterus and cervix) or a laparoscopic supracervical hysterectomy (removal of uterus without the cervix).

Advantages

"I think that MISP's most important quality is that we offer patients a wide range of minimally invasive techniques, via both laparoscopy and hysteroscopy, to treat common gynecologic conditions, including uterine fibroids. All of these techniques have the benefit of shorter hospital stays (if a stay is even required), less pain, less risk of wound infection, less blood loss, less scarring and faster recovery time," says Dr. As-Sanie.

There are still reasons to choose to have procedures done in the operating room. For some women it is reassuring to have sedation, and some women choose a treatment that requires anesthesia, such as hysterectomy, because it is right for their needs.

Whatever decision is made between a patient and her doctor, a woman benefits from the experience of the team and all the options available to her.

Contact the U-M Department of Obstetrics and Gynecology at (734) 763-6295 or visit: www.med.umich.edu/obgyn/mis/procedures/index.htm.



Suzie As-Sanie, M.D., M.P.H.

The Hysterectomy Alternatives Clinic (HALT Clinic)

Each year, more than 600,000 women in the United States have a hysterectomy. This operation to remove a woman's uterus is the second most common surgery among women in this country. There are many misconceptions surrounding the recommendations for this procedure, the different techniques available and the alternative treatments for patients' fibroids or bleeding problems. Many women do not feel well-informed of their non-surgical and surgical options.

Elisabeth H. Quint, M.D., directs the Hysterectomy Alternatives Program (HALT) at the University of Michigan

Health System. HALT provides women with a medical workup as well as information and counseling about alternatives to hysterectomies. A discussion regarding the different types of hysterectomies including partial (leaving cervix and/or ovaries) or complete hysterectomy (by various approaches) can also be included if desired.

Alternative treatments may include hormonal management of bleeding (including oral, IUD, patch or ring management), myomectomy (by vaginal, abdominal or laparoscopic approach), endometrial ablation, or uterine artery

embolization.

Appointments are available by physician or self-referral. To make an appointment in the HALT clinic call (734) 763-6295. Visit the UMHS OB/GYN Web site (search HALT) for more information: <http://www.med.umich.edu/obgyn/index.htm>.



Study Participants Needed

Women between the ages of 18 and 52, with or without chronic pelvic pain or endometriosis, may participate in this study about "Mechanisms of pain in women with endometriosis."

This study, which will require one visit, involves a variety of tests, including assessing sensitivity to pressure when applied to the thumbnail, a medical history and physical exam and a blood draw. Participants will also complete several questionnaires and receive \$40 compensation. For more information contact Jennifer Ann Miner by phone (734) 998-7020 or 1-(866) 288-0046 or e-mail: jenminer@med.umich.edu.

For More Information: Please visit the Women's Health Program Web site at www.med.umich.edu/whp or the U-M Web site at www.med.umich.edu/1libr/1libr.htm.

To Receive Future Issues: To be placed on the *Women's Health* mailing list or for more information on the Women's Health Program, call the Women's Health Resource Center at (734) 936-8886. If you no longer wish to receive *Women's Health*, please e-mail womenshealth@glcomm.com and ask to have your name removed from the mailing list.

Mission: To provide the highest-quality health care to women through coordinated service, collaborative research, extensive education and outreach.

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Reading List



U.S. Department of Health & Human Services
<http://www.4woman.gov/faq/fibroids.htm>



Medlineplus.gov
<http://www.nlm.nih.gov/medlineplus/uterinefibroids.html>



Fibroids: The Complete Guide to Taking Charge of Your Physical, Emotional, and Sexual Well-Being by Johanna Skilling



Uterine Fibroids: What Every Woman Needs to Know by Nelson Stringer, M.D.



SPRING WOMEN'S HEALTH SEMINAR

Menopause: More Than Hot Flashes

The UMHS Women's Health Program sponsors free community health and wellness seminars. These seminars provide credible health and wellness information presented by University of Michigan Health System experts.

Join us for our next seminar focusing on menopause. Whether you are currently going through menopause or thinking to the future, you will have a chance to have your questions answered and learn more about this interesting topic.

Please contact the Women's Health Resource Center for date, time and location by calling (734) 936-8886 or visiting the Web site: <http://www.med.umich.edu/whp/>.



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