Uterine Fibroid Embolization

A uterine fibroid is a non-cancerous growth on or in the uterus. Embolization is a way to keep the blood supply away from the fibroid without using surgery. The fibroid dies and dissolves over the next few days.

What are uterine fibroids?
Uterine fibroids are made of smooth muscle and connective tissue. Size varies from a pinhead to larger than a melon. What causes fibroids is unknown, but estrogen plays a role in their growth.

Most often, the problems seen are menstrual cycles (periods) that are longer than normal and heavy bleeding during your periods. Fibroids can also cause pain in the lower back and more cramping than usual.

There are different types of fibroids and their names are based on where the grow. The picture shows some of the types.

What is uterine artery embolization?
Very small particles are injected into the artery that supplies blood to the fibroid. These particles stop the blood flow, causing the fibroid to die.

Before the procedure
• Do not eat or drink anything after midnight before the day of your procedure.
• You may have sips of water with your medicines the morning of your procedure.
• If you know you are allergic to IV contrast dye, please let your doctor know right away. Contrast dye is a medicine that allows certain parts of your body to show up on x-rays and scans.
How the procedure is done

- A doctor trained in radiology, called an Interventional Radiologist, will do the procedure.
- You will be in the hospital all day for the procedure and will stay overnight. You should be able to go home the next day.
- You will lie down on a table. The top of both of your legs at your groin will be cleaned and shaved. A sterile drape is then put over this area.
- Local anesthesia or numbing medicine will be injected under the skin in this area.
- You will be given medicine through your IV to sedate you. This medicine is given to control your pain and anxiety. It will make you feel drowsy and comfortable and may keep you from remembering the procedure.
- The doctor will place a tube, called a catheter, into the femoral artery in your groin and guide it to the uterine artery. Special x-ray equipment is used to help the doctor see the uterine artery on a screen.
- Very small particles, about the size of grains of sand, will be injected through the catheter until blood no longer flows to the fibroid. This tissue will breakdown and leave your body on its own.

After the procedure

- When the procedure is done, a device may be used to close the artery or pressure will be put on the area where the catheter was for 10 to 20 minutes. If a device is used, you will have to lie flat 2 hours before you can get up. If pressure is used, you will have to lie flat for 4 hours.
- You will be taken to the Radiology Prep and Recovery Unit (RPR) where the nursing staff will check your leg often for bleeding and monitor your vital signs.
- The sedation and pain medicine given during the procedure may make you drowsy after the procedure.
- You may have a catheter or tube in your bladder to drain urine while you are on bed rest.
• You may feel abdominal cramping and pain after the procedure. You will be able to give
  yourself pain medicine as needed through your IV.
• You may eat and drink right after the procedure. Drink at least 8 glasses of fluid to help clear
  the contrast medicine from your body.
• If you feel like you are going to cough, sneeze, or bear down for a bowel movement, apply
  gentle pressure to the puncture site with your hand.
• Your artery may be closed with a vascular closure device. Please read the information given to
  you by your staff nurse about your device.
• If you want to bathe on the same day after the procedure, please ask for help to take a
  sponge bath in bed. Wait until the next morning to take a shower.
• Expect to be in the hospital overnight. You will be able to go home the next morning once you
  are able to eat and drink and when your pain is controlled with medicines taken by mouth.

Your care at home

Transportation
• You will need to stay in the hospital for 23 hours after the procedure.
• You will need an adult family member or friend to drive you home on the day after your
  procedure. It is not safe for you to drive or return home alone.

Vaginal Discharge
• After you return home, you may continue or start to have vaginal discharge. This discharge
  may be grayish or brown in color, and tissue may be seen. The discharge is normal and is from
  the breakdown of the fibroid tissue.
• Your next few periods may be heavier than normal. This heavy menstrual flow will decrease
  without treatment. Some patients who are close to menopause may stop having menstrual
  cycles.

Activity Guidelines
• Limit your activity for the first two days after this procedure to help your recovery and to
  prevent problems.
• Someone should stay with you as you rest in bed or on the sofa the day after the procedure.
• Slowly increase your activities the next day, but do not plan on working for 7 days after the
  procedure.
• Do not drive for 24 hours. Limit climbing up the stairs to one time during the first 24 to 48
  hours.
• Do not lift objects weighing more than 5 pounds for 48 hours.
• Avoid bending at the waist for 48 hours.

Care of the Site Where the Catheter was Placed
• Check the site for signs of problems each day for 2 days.
• Do not allow your groin area to soak in water, such as in a tub bath, a swimming pool, or a hot
  tub until the groin site has completely healed.
• Some tenderness at the site is normal within the first 2 weeks.
Possible problems

Bleeding from the Catheter Site
- If bleeding from the groin site occurs, lie down on your back as flat as possible. Have someone apply firm pressure with a gauze pad or clean towel just above the puncture site for 5 to 10 minutes or until the bleeding has stopped.
- After the bleeding has stopped, continue to lie flat with your leg straight for 60 minutes. When you get up, move slowly to avoid feeling dizzy.
- If bleeding occurs a second time, follow the same process. If the bleeding does not stop, call 911.

Fever
- Call your doctor if you have a temperature above 101 degrees F.

Blood Clot Forms
- Blood clots can block the circulation in your leg, causing numbness, coldness, pain, or swelling in your leg. If you have any of these symptoms, call your OSU doctor.

Infection
- Signs of infection at the puncture site include:
  - Warmth
  - Swelling
  - Redness
  - Pain
  - Drainage from the site

Call your doctor if you have any of the problems listed above. You will be given a number where to call when you leave the hospital.

For emergencies, please call 911 or go to your nearest emergency department.