



Information about Uterine Myoma 子宫肌瘤知多少？ (英文)

What Is Myoma?

Myoma is leiomyoma, also called fibroid. There are almost 30% of women troubled by such a benign tumor, and it often occurs within women of age 35 to 45.

Types of Myoma

It is classified into 3 types anatomically:

1. Subserosa myoma: growing toward pelvis and abdominal cavity, and it is usually larger than other types of myoma.
2. Intramural myoma: the most common type of myoma.
3. Submucosal myoma: growing from sub-endometrium toward uterine cavity, and it usually causes menorrhagia.

The Cause of Myoma

The cause of myoma is yet unknown and many have speculated that it has something to do with hormone because it grows larger during pregnancy and becomes smaller after menopause.

The Symptoms of Myoma

1. Menstrual cramps or chronic pelvic pain
2. Menorrhagia, prolonged menstrual period, and anemia
3. Compressional symptoms: if myoma grows large enough to compress bladder and causes bladder dysfunction like increased urine frequency and stress related urinary incontinence, it then compresses rectum, and it will be hard for patients to defecate.
4. Sometimes there is no obvious symptom, so patients are not aware of it even though it is as big as the size of a 4-5 months pregnancy.

5. During the pregnancy, myoma grows rapidly and causes pain and complications like fetus malpresentation, dystocia, and post-partum hemorrhage.

The Diagnosis of Myoma

1. Pelvic examination
2. Ultrasonography
3. Hysteroscopy

Treatment

- The following conditions indicate the necessity of an operation:
 1. Dysmenorrhea and menorrhagia
 2. Tumor has grown so big and compressed bladder and large intestine
 3. The myoma size is as large as the uterus at 12th gestational weeks
 4. Tumor itself grows too rapidly
 5. Myoma pedicle torsion is suspected
 6. Infertility caused by obstruction due to compression of submucosal or intramural type myoma proximal to fallopian tube
- The following conditions opt out operation:
 1. The size of myoma is small and there is no severe symptoms noted
 2. A pregnant patient
 3. Patients with menopause
 4. Post menopause patients

The Operation Method

If patients intend to have babies, myomectomy is recommended; with this, patients should regularly do the follow-up check. As to patients who do not wish to have another pregnancy, hysterectomy is rather ideal; and it is performed via vagina, abdomen, or laparoscopic. Laparoscopic is the most common operation for removing myoma now and its benefits include:

- Short-term hospitalization
- Unapparent scars
- Less painful wound
- Fast recovery

Note: total laparoscopic hysterectomy is not necessarily suitable for everyone; it is relatively inappropriate for people with severe pelvic adhesion

or gigantic myoma.

若有任何疑問，請不吝與我們聯絡
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