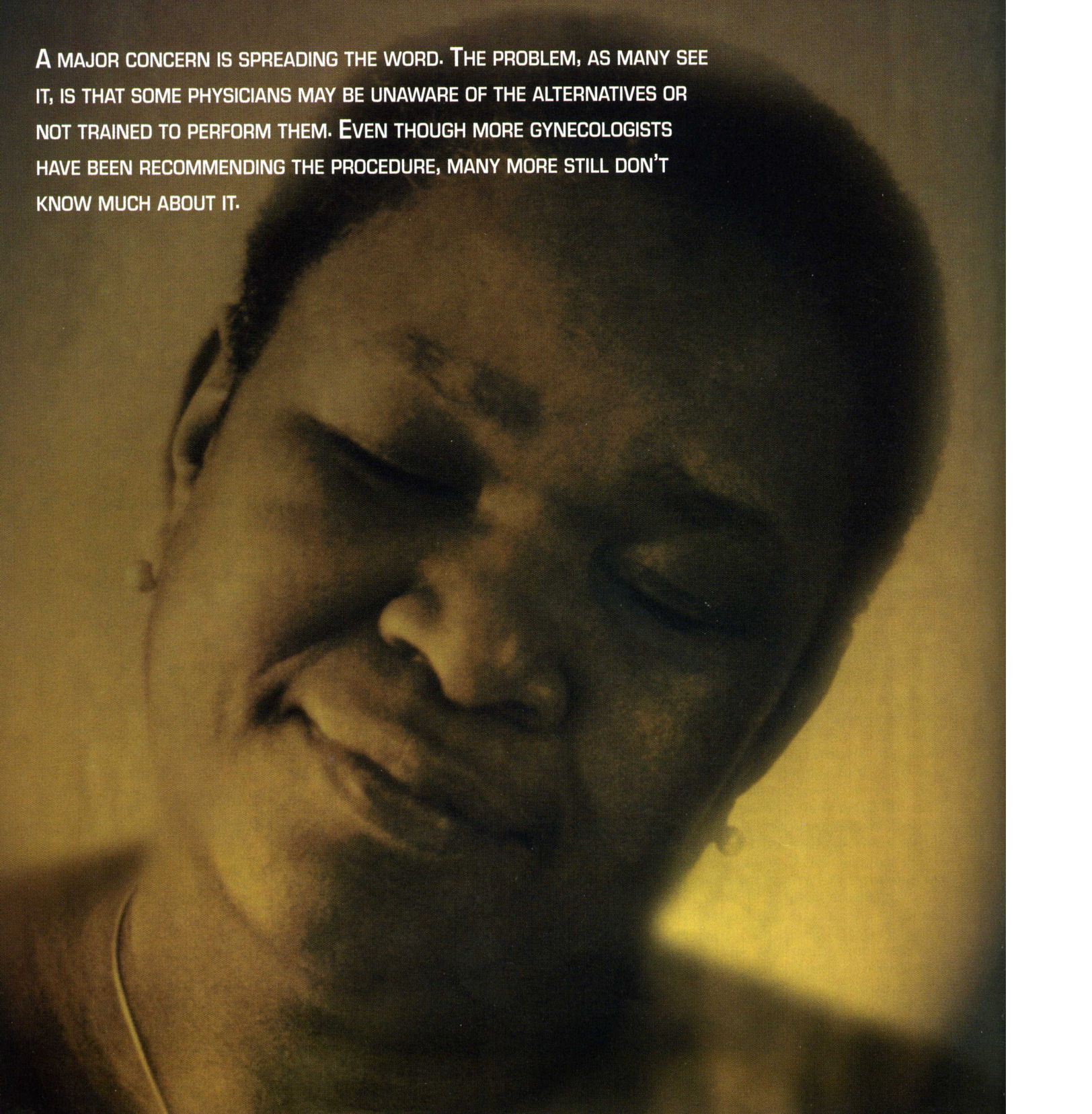


THE UFE ALTERNATIVE

A MAJOR CONCERN IS SPREADING THE WORD. THE PROBLEM, AS MANY SEE IT, IS THAT SOME PHYSICIANS MAY BE UNAWARE OF THE ALTERNATIVES OR NOT TRAINED TO PERFORM THEM. EVEN THOUGH MORE GYNECOLOGISTS HAVE BEEN RECOMMENDING THE PROCEDURE, MANY MORE STILL DON'T KNOW MUCH ABOUT IT.



SPREADING THE WORD

BY DAN HARVEY

Of all the hot topics in the arena of women's health, hysterectomy is certainly one of the most controversial. The most vehement critics of the procedure, which involves the surgical removal of the uterus, call it "female castration." Others describe it as one of the most unnecessary operations performed.

Critics of the procedure also point out that many women don't realize that less invasive—and certainly less traumatic—alternatives are available for certain gynecological conditions. According to a 1999 survey conducted by the Society for Women's Health Research, two-thirds of American women are unaware of alternatives to hysterectomy for treating excessive menstrual bleeding, or *menorrhagia*—a condition that can result from uterine fibroids. An estimated 600,000 hysterectomies are performed yearly, and 20% of those are done to treat excessive bleeding, despite the existence of less invasive procedures. The survey also reveals that doctors recommend hysterectomy to one in four women and 82% of those women accept their doctors' recommendation. Further, the survey indicates that more than one-third of women who had a hysterectomy didn't discuss potential alternatives with their doctors.

One of the alternatives available to women to treat menorrhagia—or, in fact, other symptoms stemming from fibroid tumors—is an interventional radiologic procedure called *uterine fibroid embolization* (UFE), also called *uterine artery embolization*.

"The success rate of this procedure is extremely high," says Michael G. Wysoki, MD, clinical assistant professor of diagnostic radiology, section of interventional radiology, Yale University School of Medicine, New Haven, Conn. "The technical success is 98%, and the clinical success—meaning that the women will not need any other intervention—is between 85% to 95%, depending on the symptoms. For bleeding, it is 95%."

Wysoki, a strong proponent of UFE, believes women owe it to themselves to

explore the alternative. Hysterectomy, in many cases, is just too drastic, he says. "Hysterectomy involves three or four days of hospitalization and six weeks of recuperation. Also, there is the severe psychological and sexual implications with the procedure," he says.

True, more women are asking about UFE. Still, far too few women opt for—or even know about—the procedure. "Less than 5% of all patients who could use this procedure actually are getting it," Wysoki notes. "So far, only 10,000 UFEs have been performed. There is still a long way to go."

INTERVENTIONAL RADIOLOGY

Interventional radiology (IR) began to blossom in the mid-1970s, thanks to the improved ability to see inside the body with radiologic imaging as well as the development of tools such as catheters. In recent years, IR increasingly has provided less invasive and less expensive alternatives to traditional surgeries. Procedures can be performed on an outpatient basis or require only a short hospital stay, as risk, pain, and recovery time are minimized. In 1992, the American Medical Association recognized IR as a medical specialty. Today, more than 5,000 interventional radiologists practice in the United States.

Common interventional radiologic procedures include angiography, balloon angioplasty, chemoembolization, and radiofrequency ablation. As Wysoki indicates, UFE is a far less common IR procedure. However, he believes that will change. "I have seen more and more gynecologists starting to embrace this procedure," he says. "It is becoming part of their arsenal for treating fibroids."

UTERINE FIBROIDS

Uterine fibroid tumors—also called *leiomyoma*, *myoma* or *fibromyoma*—are non-cancerous growths that develop in the muscular wall inside the uterus. The tumors are common and, in many cases, not problematic. However, for some women, the tumors cause heavy menstrual bleeding, an enlarged

uterus, clotting, and pelvic pressure or pain. Often, these symptoms become so severe that women seek treatment.

Fibroids range in size from 1/4 inch to 10 inches or more. In severe cases, they can make a woman appear pregnant. The three primary types of tumors are as follows:

- subserosal fibroids, which develop under the outside covering of the uterus and expand outward through the wall;
- intramural fibroids, which develop inside the uterus lining and expand inward, increasing the size of the uterus; and
- submucosal fibroids, which develop just under the lining of the uterus. These are the least common but the most problematic. They can cause heavy bleeding for prolonged spans of time.

Uterine fibroids become more common as a woman ages. The tumors appear in approximately 20% to 40% of women age 35 and older. Researchers aren't sure what causes the tumors, but they have been linked to genetic disposition. As many as 50% of African American women have fibroids of a significant size.

The most common procedure used to treat fibroids has been hysterectomy because it has proven to be especially effective. A less invasive alternative is *myomectomy*, a surgical procedure that removes just the fibroids, not the entire uterus. It is used most often in younger women who may want to have children. Long-term studies have shown that it has an 80% success rate in controlling symptoms. However, the more fibroids that are present, the less successful the treatment. Plus, in 10% to 30% of cases, fibroids grow back in several years. Also, complications include infection and bleeding, and the procedure may cause pelvic scarring, which may make future surgery difficult and could lead to fertility problems.

While myomectomy, in the appropriate cases, is viewed as a desirable alternative to hysterectomy, many are starting to view UFE as an even better alternative. Results of studies have shown that 78% to 94% of women who undergo the procedure experience sig-

