Leiomyomas (fibroids) in the uterus are benign tumors and are common in women of reproductive age. They are treated when they cause abnormal bleeding, pain, pressure, or bloating.

The usually appropriate treatments are (1) oral medication; (2) uterine artery embolization (UAE), or blocking the arteries that feed the fibroids; (3) myomectomy, or the surgical removal of the fibroids; and (4) hysterectomy, or surgical removal of the entire uterus. High-frequency focused ultrasound (HIFU) ablation surgery, in which sound waves are used to break down the fibroid, can also be used.

In middle-aged woman with multiple fibroids, excessive menstrual bleeding, urinary frequency, and bloating who are not pregnant and do not want a future pregnancy, UAE or hysterectomy is usually appropriate. If there is uterine wall fibroid and growth of uterine lining tissue into the uterine wall, surgical removal of uterine lining may be appropriate.

In middle-aged woman with pelvic discomfort and uterine lining fibroid, UAE, myomectomy, or hysterectomy is usually appropriate. Oral medication may also be appropriate. If there is fibroid compressing the rectum, UAE, myomectomy, or hysterectomy is usually appropriate.

In childbearing-age woman who do not want a future pregnancy but are concerned about losing femininity after hysterectomy, UAE is usually appropriate. Hysterectomy may be appropriate but would result in complete loss of fertility.

In childbearing-age women with multiple fibroids in the uterine wall who may want a future pregnancy, UAE or myomectomy is usually appropriate. Ultrasound ablation (HIFU) may also be appropriate.

See the full appropriateness criteria for this topic at: https://acsearch.acr.org/docs/69508/Narrative/.

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