

## Uterine Fibroid Embolisation

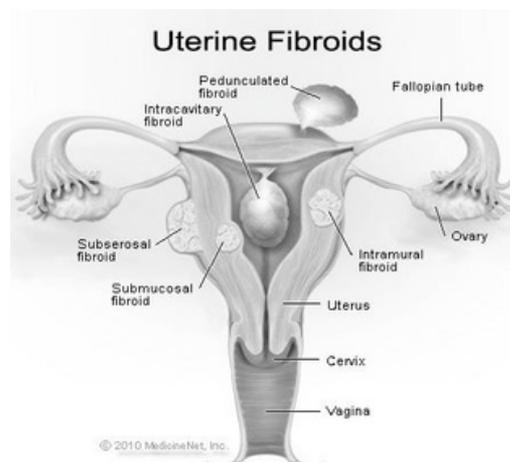
Is a procedure performed to eliminate the blood flow to Fibroids using x-rays and contrast (x-ray dye). A specialist known as an Interventional Radiologist performs these procedures. The contrast is injected through a thin plastic tube called a catheter, which is passed through a sheath inserted into the femoral artery.

### Why do I need this procedure?

This procedure stops the blood supply to the fibroid(s) (non-cancerous growth) in the lining of the uterus, which often have the following symptoms;

- Heavy bleeding, anaemia, fatigue.
- Painful periods,
- Heavy sensation in the pelvis and back pain.

It is an alternative to surgical treatments such as a hysterectomy or myomectomy (a procedure which removes only the fibroid from the uterus).



It may also be a procedure that is done in combination with surgery. This will be discussed this with you at your appointment.

### What should I expect?

- The procedure can take between 45-90mins.
- The contrast can cause a warm flushing or burning sensation. It only lasts for a few seconds and stops once the contrast has stopped being injected. **Please ring MIVIR if you have a known allergy to Iodine or contrast.**
- You may be required to take some time off work – please let the nurses know so they can organise a medical certificate for you. An attendance certificate can be provided for your carer.
- You will be required to stay overnight in hospital.
- We recommend you take the following week off work.
- It is not uncommon to experience flu like symptoms after the embolisation, this can last up to 5 days. Vaginal bleeding and discharge is common after the procedure and may only last a few days. Avoid using tampons during this time.
- Please contact MIVIR if you have any questions or concerns.

### On the day of your procedure

You will need to present to the Day Procedure Unit on the day of your procedure – your admission time will be sent with your appointment confirmation. This will allow the nurses time to complete your admission paperwork and any other tests that may be required such as blood tests or pre-medication.

You will be required to fast for 4 hours before your procedure – this means no food or fluids. You may take any regular medication with a small sip of water. Please continue to take your blood pressure medication. Please bring all of your regular medications with you.

Please contact MIVIR if you are taking medication for the following;

- Diabetes,
- Stroke,
- Heart Conditions such as a Heart Attack or Atrial Fibrillation.

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## Pre Procedure

You will be required to change into a hospital gown and remove all clothing including your underwear. A cannula will be inserted into one of the veins in your arm or hand so medication can be given before, during or after your procedure. You may need to have some hair removed from your groin crease. You will be given a pre medication of steroids and sedatives approximately 30min before the procedure.

You will be seen by and cared for by the Anaesthetic team during your stay in the Cardiovascular Centre.

## Procedure

You will be taken into the Angiography Suite and positioned on the table. Monitoring equipment will be attached so the nurses can monitor your blood pressure and heart rate throughout the procedure. You will be given intravenous sedation and pain relief throughout the procedure. The scrub nurse will clean the top of your leg with a cold antiseptic solution and then cover you with a sterile drape. Local anaesthetic will be injected into the skin, which will sting for 15-20 seconds. You should only feel pushing and pressure after this. You will experience pain during the procedure; similar to the pain you have during your period.

## Post Procedure

At the end of the procedure the sheath will be removed and a closure device will be used to close the puncture site. You will be required to lie flat for a minimum of 2 hours after the sheath is removed. During your time in the recovery room the nurses will monitor your blood pressure and heart rate and regularly check the puncture site for any signs of bleeding. You will also be given pain relief as required. You will be taken to the ward once your pain is well controlled.

## Discharge

You will be discharged home the following day with a prescription for oral pain relief. You must have someone to collect you. You will require a 6-week follow-up ultrasound and consultation with Dr Vrazas. This can be made at your convenience by phoning MIVIR on 9411 7165.

## At Home

Avoid all exercise and strenuous activity for 2 days after your procedure. You may resume physical activity 7 days after the procedure. Sexual intercourse should be avoided for 7 days after the procedure or until vaginal discharge has stopped.

You may continue your usual diet as tolerated.

### **Please call MIVIR if any of the following occur:**

- If you develop a temperature greater than 39° that lasts longer than a day,
- Pus or foul smelling vaginal discharge,
- Worsening pelvic pain that prolonged or worse than the you felt immediately post procedure,
- Bleeding or increasing bruising at the procedure puncture site, lie down and apply pressure. If the bleeding is heavy contact 000,
- Vaginal bleeding with the presence of clots, is heavy or persistent and/or reoccurs after stopping.
- You may remove the dressing the following day – you can leave it uncovered.
- Avoid swimming, spa's and baths for 7 days.

## Useful Links

The following links also provide reliable information:

- [Uterine Fibroid Embolisation – Inside Radiology](#)
- [Uterine Fibroid Embolization \(UFE\) – Radiology Info](#)
- [Uterine Fibroid Embolization – Fibroid Doc](#)
- [Uterine Artery Embolization – Johns Hopkins Medicine](#)