PURPOSE

Our study aimed to determine the impact of uterine fibroids on fertility in patients without other associated pathologies.

METHOD

We included in the study 68 women at childbearing age (23-35 years) with infertility that were diagnosed on gynecological examination with uterine fibroids. We also watched the importance of localization of fibroids, size and number of tumors.

UTERINE FIBROIDS AND FERTILITY

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Depending on the location of the tumor, we identified 41 (60.29%) subserosal and intramural, 20 (29.41%) submucosal and 4 (5.88%) intracavitary. Only 3 (4.41%) cases had multiple fibroids with various location

After hysteroscopic interventional therapy associated with progesterone, was obtained a pregnancy in 9 cases with submucosal and 3 with intracavitary fibroids.

9 (18.36%) from the pregnancies obtained were not carried to term, of these, only one having as a direct cause the presence of fibroids, with an isthmic submucosal location with overgrowth during pregnancy.

36 (52.94%) patients achieved a pregnancy within 3 months of initiating treatment with progesterone on days 16-25 of the cycle. Those were cases with unique fibroids, 28 (77.77%) with subserous or intramural location, and 8 (22.22%) submucosal, with dimensions 20 to 60 mm. Of these, two (5.5%) patients aged over 30 years had miscarriage in the first trimester after repeated bleeding (presenting fibroids of 52 and 55 mm).

A patient of the 3 with multiple fibroids obtained a pregnancy after 2 cycles of treatment with ulipristal acetate.

It was found weak Doppler signal on the fibroid area in 42 (85.71%) patients who achieved a pregnancy, and maximum diameter of fibroids during pregnancy was 63mm.

RESULTS

CONCLUSIONS

- •Uterine fibroids are a significant health problem in the feminine population of childbearing age, both by impaired quality of life and its impact on fertility.
- The new and usual treatment options for fibroids we will be carefully managed with emphasis on their applicability in women planning a pregnancy.



