

UTERINE FIBROIDS

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Uterine fibroids are the most common, non-cancerous (benign) growths which originate from the cells forming the muscular wall of the uterus (womb). They can grow on the uterine wall and push out into the bladder, bowel or intestine. They can also grow within the uterine wall, or even project from the wall of the uterus on a narrow stalk into the uterine cavity. The growth patterns of uterine fibroids vary — they may grow slowly or rapidly, or they may remain of the same size. Some fibroids go through growth spurts, and some may shrink on their own. Many fibroids that have been present during pregnancy shrink or disappear after pregnancy, as the uterus goes back to a normal size. As many as 1 in 5 women may have fibroids during their childbearing years (the time after starting menstruation for the first time and before menopause). Half of all women develop fibroids by age 50. Fibroids account for about one quarter of all hysterectomies, usually not associated with malignancy; which rarely develop into cancer called sarcoma. The risk that a sarcoma develops from a fibroid is estimated to be between 0.2 to 0.5%. Sarcomas tend to develop in older women. Generally, fibroids do not increase a woman's risk for uterine cancer in female. Most of the women are unaware of them because they often cause no symptoms and are silent. Your doctor may discover fibroids incidentally during a pelvic exam or ultrasound.

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Depending upon the location uterine fibroids can be classified in to 4 types:

Intramural fibroids - These are located in the wall of the uterus. These are the most common types of fibroids.

Subserosal fibroids - These are located outside the wall of the uterus. They can develop into pedunculated fibroids (stalks). Subserosal fibroids can become quite large.

Sub mucosal fibroids - These are located in the muscle beneath the lining of the uterus wall and are often the most troublesome as they tend to produce heavy vaginal bleeding.

Cervical fibroids - These are located in the neck of the womb (the cervix).

Causes of uterine fibroids:

Exact cause is currently unknown, but fibroids are said to be linked to estrogen and oral pills. There is evidence that progesterone may also stimulate fibroid growth.

Genetic predisposition and stress too contribute significantly.

Many fibroids produce no symptoms at all. For instance, subserosal fibroids would probably produce no symptoms and would require no treatment. However, some fibroids do cause symptoms that include:

Heavy menstrual bleeding - typically, fibroids that produce heavy menstrual bleeding is located near the surface of the uterine lining or within the uterine cavity.

Urinary frequency - fibroids can dramatically increase the size of the uterus, since the front wall of the uterus sits right behind the bladder. Therefore any enlargement at this point can reduce the bladder capacity and make you feel as if you have to go the bathroom frequently.

Fullness in the lower abdomen - in reality many women complain of a feeling of bloatedness and “fullness” in the lower abdomen yet most of them do not have fibroids. But a significantly enlarged uterus can cause a sense of fullness or bloodedness in the lower abdomen.

Infertility - fibroids, especially those located, inside the uterine cavity are associated with infertility.

Painful intercourse - again, depending on the location of the fibroid(s) intercourse may become painful.

Reproductive problems - fibroids are sensitive to estrogen and progesterone; hormones made in abundance during pregnancy. Pregnancy is a time when fibroids can grow rapidly. Some

of the complications of fibroids in pregnancy involve miscarriage and premature labor.

Stress and Fibroids:

Most people today in the 21st century are more or less under the influence of stress. Researchers have found out a connection between EMOTION and DISEASE since long. Physicians as early as the 2nd century A.D. observed a link between “melancholy” and physical illness. Researchers are finally pinpointing networks of biological systems that connect temperament with the progression of illness. Treating mental disorders could be a definite step toward slowing, even preventing physical disease, by following the principles of Homeopathy. In women with fibroids and endometriosis (It is a female health disorder that occurs when cells from the lining of the womb (uterus) grow in other areas of the body), stress may often negatively affect hormonal balance and muscle tone upsetting the estrogen and progesterone balance and triggering excessive output of adrenal stress hormone, cortisone which in turn increases estrogen which is supposed to be the root cause of tumors in females. Growth in the size of fibroid tumors is also seen more during times of stress. Stress, cortisone and antidepressant drugs increase the estrogen level, which can significantly help in the development of fibroids.

Diagnosis:

Large fibroids can be detected on physical examination. Smaller ones are generally seen on ultrasound exam, CT scans and MRIs. Ultrasound, however, is quite accurate and cost effective and so this test is the one most often used. Fibroids can also be detected on laparoscopy and hysteroscopy.

Modern Management includes:

Conservative.

Hormonal therapy.

Surgical: Myomectomy, Hysterectomy. Every 10 minutes more than 12 hysterectomies are performed all around the world. Women are sent to the surgeon in large numbers, but what about the women who are unmarried or recently married and are planning for future pregnancy?

Role of Homeopathic medicine in treating fibroids:

All fibroids have a network of blood vessels which keep the fibroid live as well as help it grow in size. The medicines we prescribe might help by:

- a. Reducing or cutting the blood flow to the tumor.
This is evident by the reduced bleeding or hemorrhage experienced by women on starting homeopathic medicines.
- b. Blocking the blood flow causes death of the entire or part of the fibroid.
- c. The fibroid usually shrinks in size over a few months. One may also experience pieces of the amputated fibroid being expelled out usually during the menstrual cycle.

Constitutional treatment alone will lead to the absorption or expulsion of an internal growth which has been produced by constitutional factors, the connection of which is apt to reverse the process. A carefully chosen remedy in strict accordance with the principles of Homeopathy, and deriving factors affecting you and altering the state of disease and taking into account you as a person is assessed and appropriate treatment for you is made which could be different for each person suffering from same disease. The co-relation of stress and fibroids speaks volumes in favour of a holistic treatment, emphasizing that the cure to the complaint does not lie in treating only the symptoms, but through an overall treatment which is the sort of treatment involved in Homeopathy.

All these things can be brought to normal by homeopathic medicines based on the individual state and constitution.

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