

## 英文

### Understanding Uterine fibroids

A uterine fibroid is a benign tumor originates from the smooth muscle layer of the uterus. It is commonly found in women between 30-50 years old. A tumor grown within the muscle layer is called an intramural fibroid, while a tumor grown inside the uterus is called a submucosal fibroid, and a tumor grown underneath the mucosal (peritoneal) surface of the uterus is called a subserosal fibroid. Most women with uterine fibroids do not have any symptoms. They are found when the women are under regular gynecological examination such as internal examination or ultrasonic examination by gynecologists

#### Clinical Symptoms

1. Compression Symptoms: urinary frequency, difficult defecation, backache, stomachache, and pelvic pain.
2. Heavy and irregular periods: especially for submucosal fibroids.
3. Infertility and miscarriage: Submucosal fibroids often cause infertility or recurrent miscarriage.

#### Operation Time

For women intending to bear a baby, if the fibroid is not very big, unless its location influences implantation, there is no need for operation. If the symptoms are obvious, the fibroid can be removed and the uterus can be retained. However, if the condition is severe, after the treatment, the patient should immediately undergo artificial insemination lest the fibroid relapses. When women have the following symptoms, operation should be taken into consideration:

## 中文對照說明

### 認識子宮肌瘤

子宮肌瘤是子宮壁肌肉和纖維組織所構成的良性腫瘤，多見於 30-50 歲婦女。腫瘤生長在肌壁內稱肌壁間肌瘤；向子宮腔內生長稱粘膜下肌瘤；向子宮漿膜表面生長稱漿膜下肌瘤。大部份長子宮肌瘤的婦女，並沒有不適症狀，僅在進行例行婦科檢查，由婦產科醫師做內診或超音波檢查時才會發現。

#### 臨床症狀

1. 壓迫症狀：向前壓迫到膀胱，造成頻尿；向後則壓迫到直腸，造成有便意卻排不出、腰酸背痛、腹痛及骨盆腔疼痛的症狀。
2. 經血過量，不規則出血：尤其是黏膜下肌瘤。
3. 不孕和流產：黏膜下肌瘤容易造成不孕或重覆流產。

#### 開刀時機

對於還想生育的婦女，如果肌瘤不是太大，除非是長在會影響著床的位置，否則並不需要切除；如果症狀明顯，可只切除肌瘤，保留子宮；若情況嚴重，則在治療過後儘速以人工的方式懷孕，以免肌瘤又復發。當婦女有以下情況時，才須考慮開刀。

1. Too much menstrual blood, causing anemia.
2. Severe compression (difficult defecation and pelvic pain).
3. The fibroid grows very fast. There is possibility for having a sarcoma.
4. Infertility caused by uterine fibroids.
5. Severe pelvic pain.
6. The size of the fibroid exceeds a three-month pregnancy uterus.

## Treatment

Treatments depending on the patient's age, the retention of fertility, and psychological conditions can be divided into: hysterectomy, myomectomy, medical therapy, uterine artery embolization. Those who want to keep fertility or keep their uterus are applicable for myomectomy, but it is possible to relapse.

Some people misunderstand that after hysterectomy, one would enter menopause, but in fact, it is the ovary rather than the uterus that controls female hormones. Therefore, the undergoing of hysterectomy does not guarantee menopause. One only stops having periods.

## Could the fibroid shrink after menopause?

Generally speaking, lacking of the stimulation of hormones, after menopause, the fibroid would usually shrink. If it doesn't, the patient should concern about complications or possibilities of malignant tumors.

1. 經血量過多，造成貧血。
2. 嚴重壓迫症狀(有便意卻排不出，骨盆腔疼痛)。
3. 肌瘤生長快速，有惡性肉瘤的可能性。
4. 因子宮肌瘤造成不孕症。
5. 嚴重骨盆腔疼痛。
6. 肌瘤大小超過懷孕三個月大的子宮大小。

## 治療

處理方法依據年齡、生殖能力須否保持、患者的心理狀況而定，可分為：子宮全切除術、子宮肌瘤切除術、內科療法、子宮動脈栓塞。想保有生育能力或想保存子宮的患者適用子宮肌瘤切除術，但會再復發。

有人會誤以為接受子宮全切除手術之後，就會進入更年期。其實控制女性荷爾蒙分泌的器官是卵巢，並不是子宮，所以子宮切除後並不代表就會進入更年期，只是月經不再來而已。

## 停經後，肌瘤可能萎縮？

一般而言，停經後因為缺乏荷爾蒙的刺激，通常肌瘤會逐漸萎縮，若沒有萎縮反而變大，就要擔心有病變或惡性化的可能。