

Uterine fibroid embolization does not prevent future pregnancy

By Reuters Health

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NEW YORK (Reuters Health), Jan 8 - Uterine artery embolization for the treatment of myomata is not contraindicated in young women who want to preserve their fertility, according to results of a prospective study conducted in Spain.

Despite concerns regarding the impact of uterine fibroid embolization on the ovaries, "studies on utero-ovarian vascularization and on the impact of embolization on ovarian function ... have shown the risk of ovarian failure to be negligible (< 1%) in uterine fibroid embolization patients who are younger than 40 years of age," Dr. Isabel Pinto Pabon and coinvestigators write in the December 2008 issue of *Fertility and Sterility*.

To further characterize the effect of uterine fibroid embolization on fertility, Pinto Pabon at Hospital de Madrid, Montepincipe, and associates followed 100 patients with symptomatic uterine myomata treated between 2002 and 2006. Uterine artery embolization was carried out by using 500-1200 µm tris-acryl gelatin microspheres.

Among 39 women ages 40 and younger who wanted to remain fertile, there were 11 pregnancies in 10 women who conceived between five and 30 months following the procedure, including one patient who became pregnant twice. Two pregnancies were achieved by assisted reproduction techniques and nine were spontaneous.

The three cases of early spontaneous abortion in two patients "does not appear to be higher than the rate for the general population," the investigators note.

Among the eight live births, only one was delivered preterm (a macrosomic fetus delivered at week 33). Otherwise, the infants were born at term, with no cases of abnormal placental implantation or other significant neonatal problems.

To confirm these findings, "randomized controlled trials comparing myomectomy and embolization in a younger population desiring pregnancy ... are needed," Pinto Pabon and her team conclude.

[Fertil Steril](#) 2008;90:2356-2360.