

What are the risks of UFE? continued...

Complications occur in less than three percent of women who have the procedure. Complications may include: infection; allergic reactions to the dye, particles or medications; delayed pain or rash; or injury at the catheter entry site. Other infrequent, short-term complications after UFE may include: vaginal discharge; vaginal passage of fibroid tissue; or temporary stop in menstruation. The risk of serious long-term complications is low, but may include: injury to the uterus, which may require a hysterectomy; injury to pelvic organs; permanent stop in menstruation; damage to ovaries, which may result in early menopause; and additional fibroid treatment.

Will my fertility be affected?

UFEs are not recommended for pregnant women or women who desire future pregnancy. The effects of UFE on the ability to become pregnant, carry a baby to term, and on the development of a baby have not been determined. Patients who become pregnant following a UFE may be at an increased risk for complications including: premature delivery; incorrect positioning of the baby; post-delivery bleeding; and tearing of the uterus. You may require cesarean section for delivery of the baby.

Parking

Please park in the main parking lot or ramp on the north side of the hospital, near the Main Entrance. Between the hours of 7:00 am and 4:00 pm, valet parking is available for \$3. Please follow the signage to check in at Admitting.

Registration

Please check in an hour and a half prior to your appointment time. Outpatients should check in at the Admitting area located near the main entrance on the north side of the hospital. Following a brief registration, you will be escorted to the Medical Imaging Department.

My Appointment:

Date: _____

Time: _____

IF YOU HAVE QUESTIONS ABOUT
THE PROCEDURE OR YOUR
APPOINTMENT, PLEASE CALL:

INTERVENTIONAL RADIOLOGY
(515) 247-3618

WE WELCOME YOUR COMMENTS
ABOUT YOUR VISIT TO MEDICAL
IMAGING. PLEASE CONTACT US AT
IMAGINGSERVICES@MERCYDESMOINES.ORG
OR (515) 643-2919.



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UTERINE FIBROID EMBOLIZATION (UFE) *A Patient's Guide*



UTERINE FIBROID EMBOLIZATION (UFE)

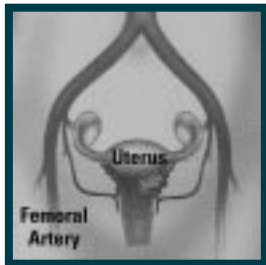


Uterine fibroid embolization is a minimally invasive treatment option for uterine fibroids. This brochure provides answers to questions about the procedure.

What is uterine fibroid embolization?

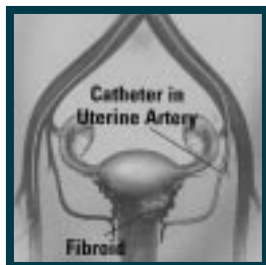
Uterine fibroid embolization (UFE) is a recent development for treating uterine fibroids. The minimally invasive procedure blocks the flow of blood to fibroids, which causes them to shrink. An interventional radiologist, a specially trained physician who uses X-ray imaging to guide the procedure, performs the procedure.

What happens during the procedure?



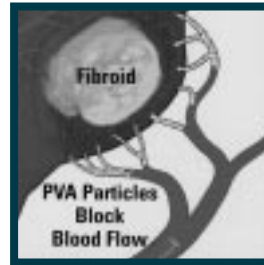
Before the procedure, you will be given a drug to relax you. You will be awake and drowsy, but won't feel pain. Next, the skin in your groin

area is cleaned, a local anesthetic is injected, and a tiny incision is made.



To start the procedure, a catheter—a small flexible tube—is inserted through the skin and into a blood vessel called the femoral artery.

The physician then steers the catheter up to your uterine artery—a blood vessel that branches from your femoral artery and supplies the fibroids. X-rays will be taken as the catheter is moved forward to make sure that it is placed correctly.



Once the catheter is in place, the physician injects a special dye to examine the fibroids. Then, small particles are injected through the catheter. These particles flow into the branches of the uterine artery, blocking the vessel and preventing blood from reaching the fibroids. The catheter is then removed and the procedure is repeated on the other side, ensuring that there is complete blockage of the blood flow. Without blood, your fibroids will shrink and relieve your symptoms.

After the procedure is complete, small dressings are placed over the incisions in your groin.

What happens after the procedure?

After the procedure, you may be required to stay one night in the hospital. Some women are able to go home the same day as the procedure. Your physician will consult with you to decide what is best.

To help with pain, swelling and cramping, your physician will prescribe medications. Before you leave the hospital, you should ask your physician about your medications and the care of your dressings.

You should also discuss any restrictions in activity. For most women, they are able to return to light activity within a few days and normal activity—including work—within one to two weeks.

After being discharged from the hospital, you will need to contact your physician if you develop a fever or experience pelvic pain that is severe or lasts longer than 24 hours. You should also call immediately if you notice a foul-smelling discharge.

How successful is UFE?

Embolization to treat uterine fibroids has shown to be a successful procedure. Studies show that the majority of women who have had the procedure have experienced significant or total relief from symptoms associated with uterine fibroids. UFE is an alternative to surgery or hormone therapy that can decrease menstrual bleeding, urinary frequency, pelvic pain and pressure. Since it is a minimally invasive technique, there is little blood loss and recovery is usually much faster than a surgical procedure.

What are the risks of UFE?

Though UFE are safe and effective, there are a few side effects.

Most patients experience discomfort and cramping in the first several hours following the procedure. This may continue for several days after the procedure. Nausea and fever may also occur. All of these symptoms can be treated with medications.