

Uterine fibroids (myomas)

Benign tumours that develop from the uterine muscle are often called myomas or fibroids. Uterine myomas are common, and are found in 70% of women of childbearing age, but only 15–30% experience symptoms. Common symptoms include prolonged and/or heavy menstrual bleeding and symptoms of pressure on the bladder and bowel. Fibroids increase the risk of reduced fertility and problems in connection with pregnancy and childbirth.

Background

Most myoma patients have no symptoms and do not require treatment. Abnormal uterine bleeding can be treated with hormones. Contraceptive pills or hormonal IUDs can help to reduce heavy bleeding. Other types of medication can be used to try to shrink large fibroids, sometimes in preparation for surgery.

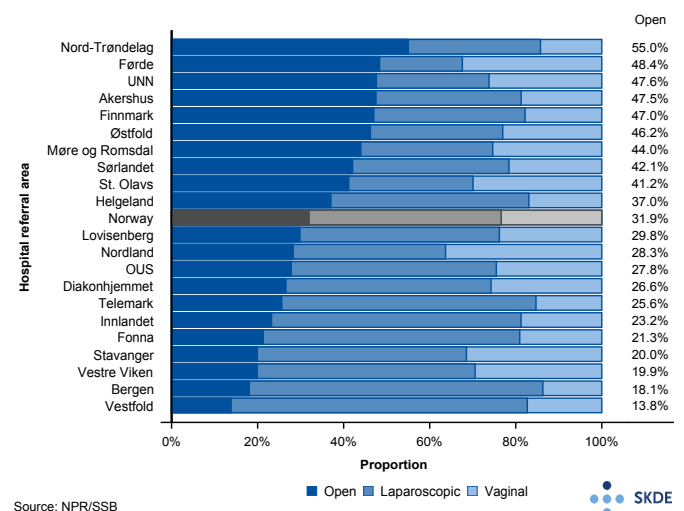
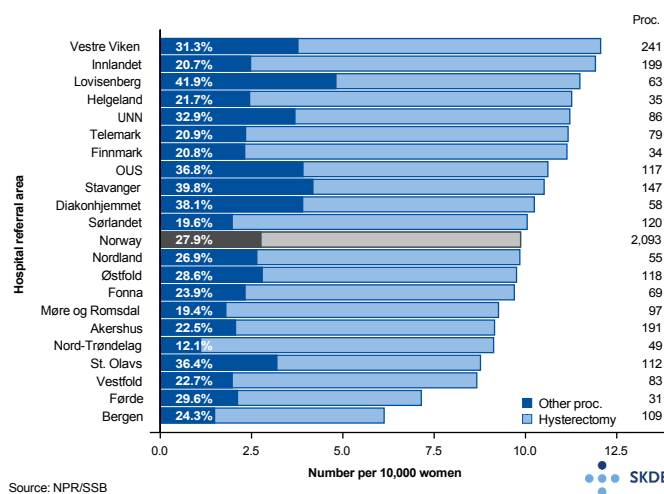
Patients who do not achieve adequate treatment effect with medication can be offered embolisation or surgical treatment. Embolisation consists of inserting microspheres into the blood supply, causing the myomas to shrink. Embolisation is not common in Norway, and is therefore not included in our analyses.

Small myomas inside the uterine cavity can be removed vaginally by means of hysteroscopic resection. If the woman wants to be able to conceive and have children, larger myomas can sometimes be removed separately, but it is more common to remove the whole uterus. In many cases, the procedure can be performed laparoscopically or vaginally, but open surgery will be necessary in some cases.

If we exclude the hospital referral areas of Bergen and Førde, there was little geographical variation in the number of procedures for uterine fibroids per 10,000 women during the period 2015–2017.

The proportion of procedures involving removal of the uterus (hysterectomy) was high, and it varied from 88% for women living in Nord-Trøndelag hospital referral area to 58% for women living in the Lovisenberg area.

There was considerable variation in the use of open surgery for uterine fibroids. The proportion of open procedures varied from 55% for women living in Nord-Trøndelag hospital referral area to 14% for women in the Vestfold area.



Source: NPR/SSB

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Number of procedures for uterine fibroids per 10,000 women, adjusted for age, average per year 2015–2017 broken down by hospital referral area and by hysterectomies versus other procedures. Average number of procedures on the right.

Percentage of procedures for uterine fibroids performed as open, laparoscopic and vaginal procedures, respectively.

Results

During the period 2015–2017, an average of about 2,000 procedures for uterine fibroids per year were performed on Norwegian women. The average age of women undergoing surgical treatment for this condition was 48 years, and the majority of patients were between 35 and 55 years of age.

Comments

If we exclude the two hospital referral areas with the lowest rates (Bergen and Førde), there is little geographical variation in the use of surgery to remove uterine fibroids.

There was however considerable variation between hospital referral areas in the use of open surgery. A significantly higher proportion of procedures is performed as open surgery on residents of Nord-Trøndelag and Førde hospital referral areas than on women living in the areas of Vestfold and Bergen.

Every year, twice as many procedures were performed per 10,000 women living in the Vestre Viken hospital referral area (12.1 procedures) as in the Bergen area (6.1 procedures).