

INTRODUCTION

Fibroids are benign, monoclonal tumors of the uterus that are composed largely of smooth muscle cells. They are the most common tumor of the female genital tract . Incidence increases during reproductive age and decreases after menopause. Presentation & clinical features depend on size and location of fibroids.

CASE PRESENTATION

A 28 yrs old, M/S 5 years, with A1 came with complaints of Anxious to conceive with Polymenorrhagia & Dysmenorrhea since 3 years Patient was diagnosed with Huge multiple fibroids 3 years back
O/E, general condition fair , pallor +
P/ A : mass ~ 30 weeks size +; bosselated, firm , Non tender , irregular and mobile
P/S: Cervix pulled up , Spotting +
P/V: UT ~ 30 weeks size, firm bosselated mass not felt separately from uterus.

CASE DISCUSSION

Pt underwent **Open Myomectomy of Multiple Fibroids with 2.5 kg of specimen removed**

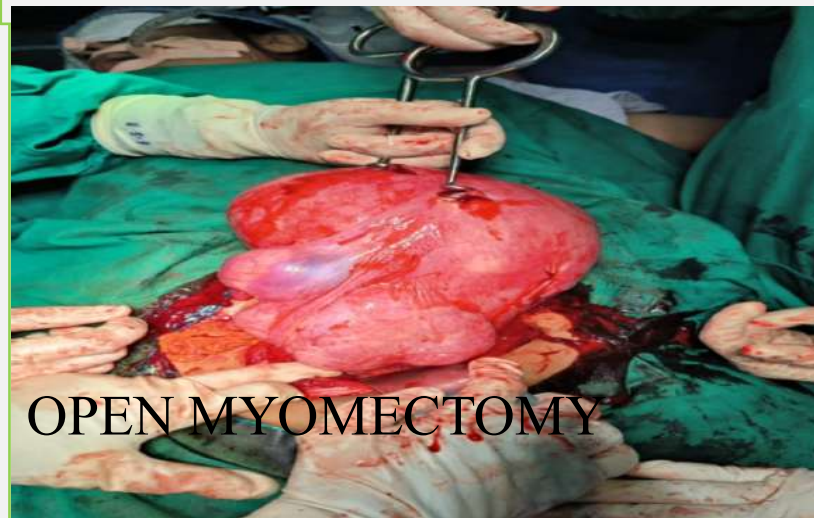
HPR report -Benign Leiomyoma

Her post operative period was uneventful

Patient discharged on day 5 th post-operative day and advised to avoid conception for 3 month

6months later , patient got conceived

At present , Patient is 22 weeks



INVESTIGATIONS

Heamoglobin- 6.4 gm/dl

Renal and liver function test- within normal limits

Ca 125, CEA , AFP, CA19-9, LDH- within normal limits

USG Pelvis done

MRI Pelvis : Uterus of 28 x 14 x 9.8 cm with bulky cervix Junctional zone normal

ET-7.4 mm

20x 14 x 8.6 cms upper uterine segment posterior wall subserosal fibroid (FIGO -6)

10 x 8 x 7 cm posterior Intramural fibroid in lower uterine segment (FIGO-4)

8 x 6 x 6 cm in anterior uterine wall subserosal fibroid in lower uterine segment

3 x 2 cms Left sided subserosal fibroid present near round ligament

CONCLUSION

Fibroid uterus can be the sole factor causing Female Infertility. This patient eventually had a positive outcome and conceived spontaneously 6 months after the procedure

“ Inspite of having huge multiple fibroids & distorted uterus , we can conserve the uterus with good surgical ”

REFERENCES

- 1.Williams Gyanecology, Hoffman, Schorge ,Hamid,Managent of Fibroid
- 2.Goldberg J.Pereira L.pregnancy outcomes following t/t for fibroids