Original Research Paper OBSTETRICS AND GYNECOLOGY



Spectrum of Fibroid in Perimenopausal and Postmenopausalwomen in A Tertiary Care Hospital

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Leiomyoma, a mimicker, a great challenger at diagnosis and surgery, occurs in more than 30 percent of women in the age group of 40-60years of age. They constitute the major bulk of the Gynecological admissions in any tertiary hospital. At our Govt RSRM Hospital ,Royapuram, Chennai an analytical study of 100 women above the age of 40 years with ultrasound and intraoperative findings of Fibroid uterus was done in the period between November 2015 and June 2016. The age distribution, parity ,type of fibroid , clinical presentation, size , surgical management were studied. In our study the fibroids were mainly distributed in the 40 to 45 year age group with lower abdominal pain as commonest symptom. Intramural was most common type and most of them underwent Total Abdominal hysterectomy with Bilateral salpingooopherectomy as the most common surgical management.

KEYWORDS

Leiomyoma/ fibroid, postmenopausal, perimenopausal, hysterectomy

INTRODUCTION:

Leiomyomas are benign smooth muscle neoplasms occurring in the Uterus and cervix and the rarer varieties can occur in the Round ligament and ligament.

They can present with different symptoms and sometimes in obese women remain asymptomatic except for some heaviness. This study is mainly to find out the presentation, complications and associated features of fibroids in the above mentioned age group. Another feature is in the older age group where we have to be more careful as Leiomyosarcoma can occur. With advanced technology they can be easily diagnosed by ultrasound.

AIM:

To study the spectrum of Fibroids in Perimenopausal and Postmenopausal women in a tertiary hospital.

To estimate the Distribution of age, Parity, Type of Fibroid, Clinical presentation, Size and Management in the different types of Fibroids in 100 Perimenopausal and Postmenopausal women.

TYPE OF STUDY: Analytical study

PLACE OF STUDY: GOVERNMENT RSRM LYING -IN HOSPITAL. CHENNAI-13

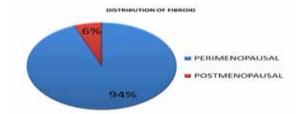
PERIOD OF STUDY: November 2015 till June 2016.

MATERIALS AND METHODS:

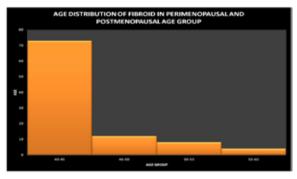
100 women above the age group of 40 years admitted to Govt Rsrm Hospital between the period of November 2015 and June 2016 with ultrasound and intraoperative finding of fibroid uterus were included in the study. The age distribution and the parity were noted. The type of fibroid , the clinical presentation, Size and management were analysed. Any associated pathology was also noted.

AGE DISTRIBUTION OF FIBROID

In our study the majority were in the perimenopausal age group ie around 94 percent. In the postmenopausal age group the distribution was 6 percent.

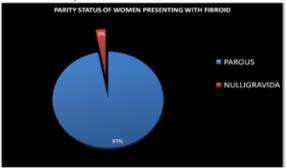


AGE GROUP DISTRIBUTION: The highest number was found in the 40 -45 age group(73%)



PARITY:

There was a 3% distribution in the nulligravidas and majority was in the multiparas- 97%

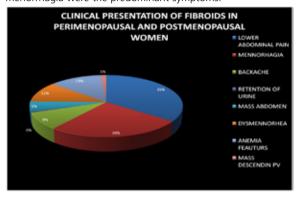


CLINICAL PRESENTATION

The patients presented with various symptoms. The main symptoms were

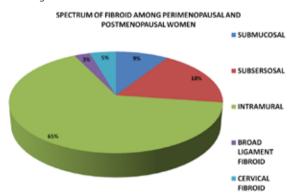
- 1) Lower abdominal pain
- 2) Menorrhagia
- 3) Backache
- 4) Urinary retention
- 5) Mass abdomen
- DysmennorrheaFeatures of anemia
- 8) Mass descending per vaginum

Out of these symptoms, lower abdominal pain, heaviness and menorrhagia were the predominant symptoms.



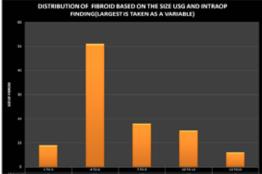
TYPE OF FIBROID

As in other studies the commonest was Intramural fibroid and broad ligament fibroid was rarest.



SIZE OF THE FIBROID

The majority of the fibroids were of 4-6cm size. Although all ranges were present from 1-3cm till 13-15cm.



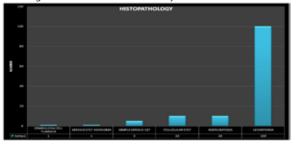
MANAGEMENT:

Total Abdominal Hysterectomy with Bilateral salpingo oopherectomy was done for most cases. Others were Lap hysterectomy, vaginal hysterectomy and small fibroids that were asymptomatic were treated conservatively.

HISTOPATHOLOGICAL FINDINGS:

2 patients had associated ovarian pathology . One had granu-

lose cell tumour and other patient had serous cystadenoma. One large fibroid of 13cm was leiomyosarcoma.



CONCLUSIONS:

- The fibroids most commonly distribute among 40-45 yrs parous perimenopausal women
- Lower abdominal pain35%,menorrhagia26% are the most common clinical presentation
- 4-6 cm fibroids are commonly seen in perimenopausal women.
- The most common type of fibroid is intramural 65% and rare type of fibroid is true broad ligament fibroid is less than 1%
- Large mutiple fibroids more than 13cm causes hydrouretereonephrosis.
- Fibroids are incidental finding in postmenopausal women while Propalse, ovarian tumour are the major finding in them

It is to be noted that peri and postmenopausal women must be adequately evaluated if they have symptoms of lower abdominal heaviness or pain. I so that early intervention can be done.

REFERENCES:

- 1. Kumar P Malhotra, N. Jeffcoates's principles of gynaecology 8th edition.
- 2. Barek JS . Novaks Gynaecology 15th edition
- Broad ligament fibroid mimicking ovarian tumour on ultrasonography and computed tomography scan, Davananda Kumar Rajanna, Vaibhav pandey, Sujit janardhan and Sujatha N Datti
- 4. Laparoscopic myomectomy of a large pedunculated fibroid: case report.
- 5. Parkar RB, Chudasama A, Chudasama M.
- 6. Broad ligament leiomyoma: Dr Aditya Shetty and Radswiki et al.