Embolization of a Large Uterine Fibroid

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CASE PRESENTATION
A 48-year-old woman presented to our institution with a history of uterine fibroid treated with high-intensity focused ultrasound.

MRI showed three fibroids, including a larger one with intramural measurements of 46 X 50 X 43 mm (Figure 1). Because of some anatomic complications from the last high-intensity focused ultrasound treatment, the patient was a candidate for uterine fibroid embolization.

PROCEDURE DESCRIPTION
From a right femoral approach, we catheterized the left uterine artery. Angiographic evaluation showed no abnormal patterns (Figure 2). Due to a clear vaginal artery, we chose not to intervene.

The right side evaluation, however, showed an abnormal pattern related to the larger fibroid (Figure 3). We chose a 0.021-inch, 2.4-F Direxion™ Torqueable Microcather with the capacity to inject large particles with a good overall flow rate, great control, and navigability. We used one 2-mL syringe of 500-μm Embozene™ Microspheres to embolize any feeding vessel of the fibroid.

FOLLOW-UP AND DISCUSSION
The treatment was successfully performed, and the embolization was completed with good fibroid exclusion. Final angiography confirmed exclusion of the fibroid and preservation of tissue vascularization (Figure 4).

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Results from case studies are not necessarily predictive of results in other cases. Results in other cases may vary.