

Is UFE right for me?

You may be a candidate for uterine fibroid embolization if you:

- Are experiencing the symptoms of uterine fibroids such as heavy bleeding, constipation, or urinary frequency
- Are not pregnant
- Are seeking an alternative to hysterectomy (removal of the uterus)
- Wish to avoid surgery or are a poor candidate for surgery

UFE has been performed for 30 years and has an excellent track record for safety and success. Studies have shown that the chances of fertility have been shown to increase after UFE.



North Star Fibroid Clinic

The doctors at NSVI are pioneers in interventional radiology. Hailing from some of the region's most prestigious healthcare and academic institutions, they were among the first (if not the first) to perform certain imaging-guided procedures in the United States.

NSVI offers the full range of minimally invasive vascular and interventional radiology services, including cancer treatment, at their state-of-the-art Minneapolis-based outpatient center. Cancer, spine fractures, uterine fibroids, knee osteoarthritis and vascular disease can be treated faster, less expensively and with greater precision and safety than ever before.

To learn more, visit
NorthStarFibroidClinic.com.



NorthStarFibroidClinic.com

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A minimally invasive treatment alternative to hysterectomy

Uterine Fibroid Embolization
(UFE)



What are uterine fibroids?

Uterine fibroids are benign (non-cancerous) tumors that grow on or within the lining of the uterus. They can range in size from as small as a grape to as large as a cantaloupe. Approximately 20-40% of women over age 35 have fibroids, and African-American women are at a higher risk for developing them.

Fibroids can result in pelvic pain or discomfort, urinary incontinence, frequent urination and heavy menstrual bleeding. The location and size of uterine fibroids can affect the severity of these symptoms and impact your quality of life. Fibroids are also hormonally sensitive, so the symptoms can be cyclical, just like with menstruation.

Traditional Treatment Options

If your fibroids are not causing pain or other symptoms, treatment may not be necessary. Your OB/GYN might wish to monitor their growth during annual examinations. If there are symptoms, many women begin with conservative measures—hormonal birth-control pills or short courses of GnRH modulators can lighten heavy bleeding and ease cramps, while NSAIDs like Tylenol(R) help manage pain. Pelvic-floor physical therapy may also relieve pelvic discomfort, improve core support and address urinary or bowel symptoms related to fibroids. While these approaches can lessen symptoms, the fibroids still remain.

When other treatments fall short, surgery is sometimes recommended. Myomectomy removes fibroids while keeping the uterus intact—often chosen by women who still want to conceive, though fibroids can return. Hysterectomy eliminates the problem entirely but requires a longer recovery, permanent loss of fertility and leaves a surgical scar.



Uterine Fibroid Embolization (UFE)

For women seeking an effective alternative to surgery, UFE is a less invasive, FDA-approved and highly effective approach for treating fibroids that does not require the uterus to be removed. It is performed by a specialized doctor called an interventional radiologist, who uses X-ray imaging to guide a catheter through the radial or femoral artery in the groin to the uterine artery. When the catheter has reached the location of the fibroids, the radiologist embolizes or “blocks” the blood vessels that feed the fibroid, depriving it of oxygenated blood. The fibroid then shrinks and the symptoms gradually disappear.

Clinical studies show that 93% of women reported improvements in their symptoms and the vast majority of women saw long-lasting relief from symptoms after five years.

UFE is performed in our comfortable and convenient outpatient center. The procedure takes less than an hour, and you may return home the same day.

