

Suffering from Myomas ?



Patient Information

HOLA®

Minimally invasive laser therapy of Myomas

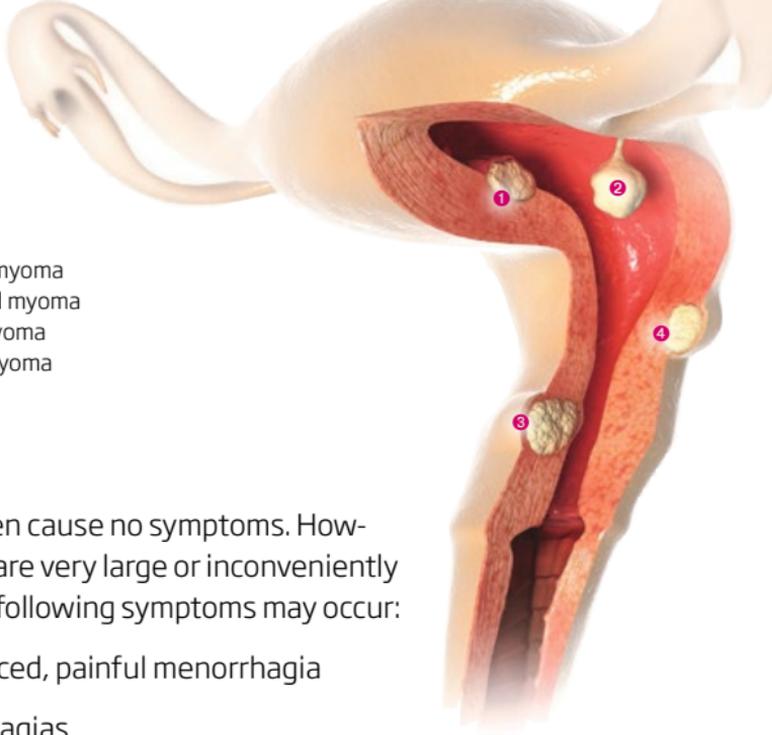
What are myomas ?

A myoma (medical term “leiomyoma of the uterus”) is a benign tumor of the uterus that occurs in around one third of women aged 30 years and up. Myomas consist of muscle and connective tissue and are differentiated depending on location in the uterus as submucosal (protruding into the uterine cavity), intramural (remaining in the uterine wall) and subserosal myomas (protruding into the abdominal cavity). Although myomas are often referred to as tumors, they are normally benign.

Causes

There is a genetic disposition for myomas, i.e. their occurrence often runs in the family. In addition, doctors suspect hormonal swings as a cause.

Myomas occur in around 30% of women over the age of 30 and can lead to a variety of symptoms.



- 1 Submucosal myoma
- 2 Pedunculated myoma
- 3 Intramural myoma
- 4 Subserosal myoma

Symptoms

Myomas often cause no symptoms. However, if they are very large or inconveniently located, the following symptoms may occur:

- Pronounced, painful menorrhagia
- Metrorrhagias
- Pain, cramps or sensation of pressure in the abdomen and pelvic area
- Urination urge, constipation
- Painful sexual intercourse
- Difficulty getting pregnant
- Miscarriages
- Complications during pregnancy

Diagnostics

Myomas are often found coincidentally during a palpation or ultrasound examination. Uterine endoscopy and magnetic resonance imaging (MRI) are used to get a better visual impression of the location and size of existing myomas.

Treatment

Myomas can be treated medically, surgically or using modern laser procedures. The type of therapy depends on the patient's age, family planning, symptoms and the location and size of the myomas. Ask your doctor to explain all options available to you.

What treatment options are there ?

Medical procedures

The growth of myomas is hormonally influenced. Estrogen antagonists are administered to shrink them. When the medication is discontinued the myomas are very likely to grow back unless they are surgically removed.

GnRH analogs - Conditions similar to menopause are induced in the body. Side effects may include menopausal complaints such as hot flashes, mood swings, loss of libido or bone loss.

Ulipristal acetate - Ulipristal acetate is a selective progesterone receptor modulator (SPRM) that blocks the effects of the gestagen progesterone (female sexual hormone) and shrinks myomas. Unpleasant side effects may include headaches, nausea and hot flashes.

Radiological procedures

Focused Ultrasound (MRgFUS) - High-frequency sound waves are aimed specifically to the myoma and heat it up to about 60 to 80 degrees Celsius, thus destroying it. The treatment takes about 3 - 4 hours, during which the patient senses heat.

Uterine artery embolization - Artificial closure of blood vessels using biologically well tolerated plastic cuts off the blood supply of the myomas. In the best case, the myomas shrink or are completely destroyed. Under this treatment, pain and damage to the ovaries are possible.

Surgical procedures

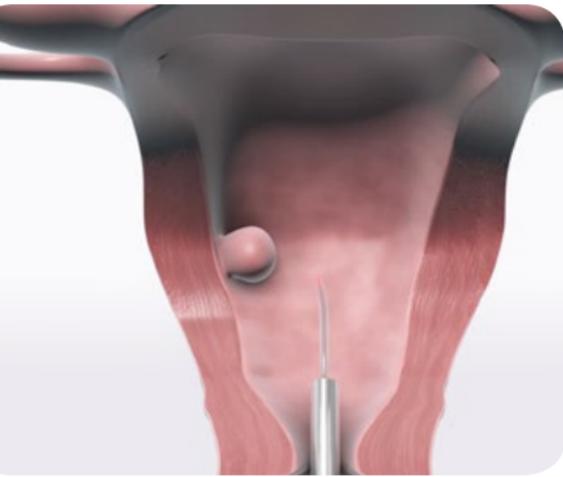
Hysterectomy - A hysterectomy (removal of the uterus) may be indicated in cases of multiple and very large myomas. Family planning should be concluded before taking this measure.

Myoma enucleation - Hysteroscopic myoma resection is done using an electrosurgical loop to divide the myoma and remove it through the vaginal passage. The use of electric current presents a risk of injury to the uterus and other organs such as the intestine.

Myoma enucleation can also be done using a laser as a gentle alternative to the electrosurgical blade.

HOLA® minimally invasive laser therapy

HOLA® (hysteroscopic outpatient laser applications) involve highly accurate excision (medical term “enucleation”) of myomas within the framework of uterine endoscopy using a glass fiber conducting laser light. The advantage of this method is that bleeding is avoided and the surrounding uterine tissue is not affected or damaged. The laser light has no effect on the uterine musculature, painful contractions of the uterus experienced with other surgical procedures do not occur following this procedure.



Only local or even no anesthesia is required for the procedure, which can be performed on an outpatient basis.

Enucleation of a submucosal myoma with a biolitec® laser





Advantages of HOLA® laser therapy

- Minimally invasive procedure
- No general anesthesia necessary
- No painful contractions of the uterus
- Gentle uterus treatment procedure, no scarring
- Recommended for women who want to have children
- No known side effects
- Rapid return to everyday life

You are looking for a doctor who treats myomas with the HOLA® laser procedure? We will be pleased to help: Call us at +49 6172 27159 11. Medical information is available directly from your treating doctor.

Your local physician

For more information, please visit:
www.info-myomas.com



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