

# Interventional Radiology Unit

# Information sheet for women leaving hospital after the procedure of Uterine

Artery Embolisation to treat their Fibroids

#### Introduction

You will be reading this when you are considered ready to go home following the above procedure Uterine Artery Embolisation (UAE).

# What should you expect to happen over the days and weeks to come? Pain The main reason for staying in hospital after UAE is to control what can be quite

severe lower abdominal and pelvic pain. If you are considered ready to go home, then this pain should be settling and now manageable on pain controlling tablets such as paracetamol. Many women liken the pain to that they associate with their periods, and it should gradually decrease over the days ahead. For most women this pain should return to normal by 5-7 days, though for some it may take 1-2 weeks.

#### Fever

A mild fever is common following any embolisation procedure and in many respects, it is a good sign in that it does imply that tissue has been damaged (the aim of the procedure). The paracetamol will help control this fever and, like the pain, it should gradually settle over 5–7 days. The fever may be associated with a general feeling of tiredness and some muscle aches, which is part of the postembolisation syndrome. For most women, these symptoms should settle over the same sort of period.

#### Vaginal discharge

A minority of women will suffer a persistent vaginal discharge after UAE which may be bloody. This is usually due to the fibroid breaking down, particularly if it is close to the lining of the uterus. Usually, the discharge persists for approximately two weeks, though occasionally it can persist for up to several months.

Some women will pass bits of a fibroid with your vaginal loss, or even a whole fibroid. This may be a little alarming but is a normal process after this procedure for some women. If the fibroid is too big to pass you may be aware of a lump in your vagina and have some cramping pain. If this is the case, use the contact numbers below and we will see you to determine if you need a small dilation and curettage (D&C) like procedure to remove the dead tissue.

#### Bruising

Some bruising at the site where the needle is inserted in the groin is normal. Occasionally this can become a larger bruise or haematoma (bruise) and may then take

Patient Information Leaflet: Women Leaving Hospital after Uterine Artery Embolisation (UAE) to treat their Fibroids Author/s: Dr Mark Lewis Author/s title: Consultant Radiologist Approved by: PIF Date approved: 30/05/2023 Review date: 30/05/2026 Available via Trust Docs Version: 7 Trust Docs ID: 9023

some weeks to settle. Very rarely this bruise can become infected and may need antibiotics.

# Other Possible Risks and Complications you should know about:

Infection Infection in the uterus is the most serious potential complication of UAE. It may occur from 2

weeks up to 3 months after the procedure. Generally, it is recognised because the pain, which has been improving, begins to get worse, and vaginal discharge may become more persistent and offensive. The fever, which may have already settled, recurs and may reach higher levels. You may notice a bloating feeling in the lower abdomen. If this happens, you must consult the hospital as soon as possible on the numbers below.

Generally, the uterine infection responds to antibiotics given in tablet form, or possibly injection into a vein. Very rarely there is the need for a hysterectomy because the infection does not come under control.

#### Early Menopause

A small number of women appear to become menopausal after UAE. All the evidence suggests that this tends to occur in women who were approaching the menopause prior to the procedure anyway. It is common for women not to have normal periods after this procedure, but if this persists for more than 6 months, we can investigate whether you really have gone through the menopause.

### Other frequently asked questions

- Avoid driving or undertaking strenuous activity for 2 days after going home. •
- Plan on 1 to 2 weeks off work. •
- Once you feel well again you can return to normal sexual relations. •
- Continue your usual contraception, including the pill if you use it. •

If you have any questions about this information sheet, please speak to the staff on the ward who can refer you to a gynaecologist or radiologist as necessary.

## Contact numbers at the Norfolk and Norwich University Hospital

Radiology Secretaries: 01603 286330 Monday to Friday 9am-5pm Email: nnu-tr.RadiologySecretaries@nhs.net

Interventional Radiology Unit: 01603 286690 Monday to Friday 8am-6pm Email: nnu-tr.iruappointments@nhs.net

Outside normal working hours, if you need urgent attention you should go to the Accident and

