

Radiofrequency Ablation of Uterine Fibroids

This leaflet explains a treatment for uterine fibroids known as radiofrequency ablation. It includes the benefits, risks, any alternatives and what you can expect when you come to hospital. Radiofrequency ablation is an appropriate treatment option for many patients with symptomatic uterine fibroids, but it may not be suitable for a certain few.

If you have any further questions, please speak to a doctor or nurse caring for you.

What is radiofrequency ablation?

Radiofrequency ablation (RFA) is a cut-free treatment option for certain types of uterine fibroids. If you been given this leaflet by your doctor this may be a treatment option suitable for you.

At St George's we have the option of two RFA devices:

- Sonata: an ultrasound device inserted into the uterus.
- STARmed: an ultrasound device inserted into the vagina.



The ultrasound is used to locate the fibroid. It then delivers radiofrequency energy to shrink the fibroid(s) and ease your symptoms.

Why should I have radiofrequency ablation?

Trials have shown that:

- About 90% of patients feel that their period was less at three months after the procedure.
- 88% of patients were satisfied with the result after 12 months.
- About 80% of patients would recommend the procedure to someone else.

What are the risks?

- You may have discomfort or pain after the treatment. Usually this settles with simple painkillers. 70% report the procedure to be very or quite tolerable.
- You may have vaginal bleeding or discharge for some days after the procedure.
- You may notice fibroid sloughing (bits of fibroid tissue, which might look 'fleshy') being passed through the vagina.

Less commonly you may develop a mild infection, causing fever or smelly discharge or a urinary tract infection. If this occurs or if you have bleeding lasting for longer than two weeks after the procedure, please contact your doctor or attend the Emergency Department.

Are there any alternatives?

If you choose not to have RFA treatment, then your doctor will discuss whether you wish to have either:

- No treatment – in this case your symptoms may stay the same or worsen.

- An alternative treatment – this depends on the number and location of your fibroids, your symptoms and whether you would like to become pregnant in the future.

Alternatives available:

- Medical treatment. This may include non-hormonal tablets such as tranexamic acid or hormonal treatment such as a contraceptive pill.
- Uterine artery embolisation is a technique where tiny particles are injected into the blood vessels to stop the blood supply to the fibroids.
- Surgical treatment. Transcervical resection of a fibroid is suitable for fibroids inside the uterus cavity. Laparoscopic (keyhole) myomectomy (fibroid removal) is suitable for fibroids outside the uterus. Open myomectomy is suitable when the fibroids are very large in size or number. Some patients choose to have a hysterectomy (removal of the whole uterus) if other treatments have not worked.

How can I prepare for radiofrequency ablation?

You should make sure that you have some simple painkillers, like paracetamol and ibuprofen if you are able to take these, at home for after the procedure. You will be advised not to eat and drink for some hours before your procedure; the pre-assessment team will contact you before the procedure to explain this in detail.

The procedure itself typically takes between 30 and 60 minutes but if you have had a general anaesthetic, then you may be in the recovery area for some time as you wake up from the anaesthetic. You will be able to go home as soon as you feel well and you will need to have arranged for an adult to escort you home after the procedure.

Asking for your consent

We want to involve you in all the decisions about your care and treatment. If you decide to go ahead with treatment, by law we must ask for your consent and will ask you to sign a consent form.

This confirms that you wish to have the procedure and understand what it involves. You can withdraw your consent at any time, even if you have said 'yes' previously. If you would like more details about our consent process, please ask for a copy of our policy.

If you are unsure about any aspect of your proposed treatment, please don't hesitate to speak with a senior member of staff again.

What happens during radiofrequency ablation?

Your doctor will ensure that you are comfortable. RFA can be carried out 'awake' under local anaesthetic or conscious sedation or you can be 'asleep' under general anaesthetic.

RFA does not involve cuts in the abdomen or any stitches, instead it involves passing the RFA device into the vagina and in some cases through the cervix into the uterus.

The device has two parts: the first is a thin camera (ultrasound scanner) which allows the surgeon to see and guide the procedure and the second is a specially designed probe that uses radiofrequency energy (a type of heat generation) to treat the fibroid. The energy is very focused and so there is no damage to the uterus around the fibroid.

What happens after radiofrequency ablation?

If you have had a general anaesthetic, then you may feel drowsy or nauseated for a few hours. You should avoid driving for 24 hours. After the procedure, you will probably have some vaginal bleeding.

If your bleeding is very heavy and worrying, you should go to the nearest Emergency Department.

Cramping abdominal pain is common and you should use simple painkillers such as paracetamol and ibuprofen (if you are able to take these). You are likely to be able to return to normal activities within a few days (average is four days). Your next period will probably occur at the expected time but may be early or late.

You may not notice an improvement in your symptoms for a few months, so do not worry if your periods or pressure symptoms are not immediately better.

What do I need to do after I go home?

Before you go home your nurse will tell you the times that you may take further doses of pain-relieving medication if you need it. During the first 24 hours, you might experience cramping type pain, feeling sick or brown discharge. Most people will feel back to normal within two days after the procedure.

You should avoid swimming, taking a bath (you can shower), sexual intercourse and using tampons for at least two weeks to reduce the risk of infection.

Call 111 or attend the Emergency Department if you feel any of the following symptoms:

- Persistent sickness or vomiting
- Heavy vaginal bleeding (more than four sanitary pads in two hours)
- Severe abdominal pain
- Temperature of 38°C or above

- Greenish or smelly vaginal discharge.

Will I have a follow-up appointment?

We will arrange to see you three months after the RFA procedure.

Contact us

If you have any questions or concerns about radiofrequency ablation, please contact our secretary who can pass a message to your doctor.

Tel. 020 8725 2088

Email: louise.jones0@stgeorges.nhs.uk

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Was this information helpful? Yes / No

Please let us know, contact

patient.information@stgeorges.nhs.uk and include the leaflet title.

Thank you.

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you advice and information when you have comments or concerns about our services or care. You can contact the PALS team on the advisory telephone line Monday, Tuesday, Thursday and Friday from 2pm to 5pm.

A Walk-in service is available:

Monday, Tuesday and Thursday between 10am and 4pm

Friday between 10am and 2pm.

The Walk-in and Advisory telephone services are closed on Wednesdays.

Please contact PALS in advance to check if there are any changes to opening times.

PALS is based within the hospital in the ground floor main corridor between Grosvenor and Lanesborough wings.

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS UK

The NHS provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.

