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# Impact of conservative versus surgical treatments on the quality of life in women of reproductive age with uterine fibroids

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Background: Uterine fibroids are prevalent benign tumors that significantly affect the quality of life (QoL) in a significant number of women during their reproductive years. The selection of treatment, be it conservative or surgical, is generally informed by the severity of symptoms, the size and location of the fibroids, the patient's age, and her intentions regarding fertility. Conservative treatments, which are less invasive and adept at managing symptoms, do not always address the root cause and may require continuous medication. Surgical options are considered for larger fibroids with pronounced symptoms or when conservative measures prove ineffective. Yet, surgery presents inherent risks and could impact future fertility, especially concerning women who plan to conceive. Given the significant impact of uterine fibroids on QoL and the varied treatment options available, it is crucial to understand the comparative effectiveness of conservative versus surgical treatments in improving QoL outcomes for women of reproductive age. This study aims to compare the impact of conservative and surgical treatments on the QoL of these patients.

**Methods**: The study employed a prospective cohort design involving 200 women, aged 18-45, diagnosed with uterine fibroids from January 2021 to December 2022. Participants were randomly assigned to one of two groups: one receiving conservative treatment (the conservative group) and the other undergoing surgical treatment (the surgical group). Conservative treatment encompassed hormonal therapy and non-steroidal anti-inflammatory drugs, whereas surgical treatment included myomectomy and hysterectomy. Quality of life was evaluated using the 36-Item Short Form Health Survey (SF-36) both prior to treatment and at 6, 12, and 24 months following treatment. The statistical difference in SF-36 scores between the groups pre- and post-treatment was analyzed using a T-test or the Mann-Whitney U test, as appropriate. A repeated measures ANOVA was utilized to assess the changes in SF-36 scores at the various time points.

Results: At baseline, both groups showed similar QoL scores (63.2 vs 62.8) and median age (31 vs 32). Following treatment, at the 6 and 12-month marks, the conservative group demonstrated a significant improvement in QoL scores, particularly in the domains of physical functioning and emotional well-being (p<0.05). The surgical group exhibited a more pronounced improvement across all SF-36 domains, with the largest gains in bodily pain, social functioning, and general health perceptions. At the 24-month evaluation, sustained QoL improvements were observed in both groups, with the surgical group consistently outperforming the conservative group in the majority of SF-36 domains. The mean SF-36 scores were 95.3 for the surgical group and 88.6 for the conservative group, respectively (p<0.05).

**Conclusion:** Both conservative and surgical treatments significantly improve the QoL in women with uterine fibroids. While conservative treatment offers a non-invasive approach with notable benefits, surgical treatment provides more substantial and comprehensive QoL enhancements. The choice of treatment should be individualized, considering patient preferences, fertility goals, and the severity of symptoms.

Keywords: Uterine Fibroids, Conservative Treatment, Surgical Intervention, Quality of Life, Women's Health

### **Biography**

Xiaoqin Wang is a dedicated researcher and clinician at The First People's Hospital of Wanzhou District and Tianjin Hospital of Wanzhou District. Specializing in women's health, Dr. Wang's research focuses on the impact of conservative versus surgical treatments on the quality of life in women of reproductive age with uterine fibroids, advancing patient-centered care in gynecology.