

Fibroid Center offers team approach

For four years, Kimberly Mitchell suffered with symptoms caused by noncancerous growths known as uterine fibroids. Birth control pills no longer alleviated the breakthrough bleeding and lower back pain. And the fibroids kept growing.

"I got discouraged and wasn't sure what to do," said Ms. Mitchell, a Miami mother of three. Then she discovered South Miami Hospital's Fibroid Center, which opened last fall as part of the hospital's Center for Women & Infants.

The Fibroid Center offers women a unique, multispecialty approach to diagnosing and treating their problems, all in one location.

"This is a one-stop shop and very convenient for the patient," said gynecologist Rafael Perez, M.D., medical director of the Center. "Everything is done in one place with experienced physicians evaluating all the treatments and using the latest techniques."

The Center features a team of specialists including gynecologists, robotic surgeons, diagnostic and interventional radiologists and fertility specialists. Along with the women and their own doctors, these specialists work together to develop and implement a treatment plan tailored to each patient.

"Historically, for a woman to get all her options, she had to go to two or three doctors," said interventional radiologist Adam Geronemus, M.D. "Ours is a team approach. After looking at all the patient's information,

we collaborate. We're able to give her all her options."

Dealing with fibroids can be emotional for women, especially when they want a family. "Many women are concerned about retaining their fertility," said reproductive endocrinologist Maria Bustillo, M.D. "We do a lot of handholding."

As many as 50 to 80 percent of women develop fibroids during their lifetime, though not all experience symptoms. Because fibroids vary in size and location, symptoms and treatments vary. Symptoms range from severe menstrual cramps and painful intercourse to anemia and miscarriages.

The Center's specialists perform different treatments to shrink the growths, including fibroid embolization, laparoscopic or robotic myomectomy, which leaves the uterus intact; removal of the uterine lining; and laparoscopic or robotic hysterectomy, which removes the uterus.

Most insurance plans cover the Center's services. In addition, each doctor bills the patient's insurance company. An evaluation and office visit with a nurse practitioner for those without insurance is \$50.

Ms. Mitchell, 34, found the Center effi-



Kimberly Mitchell discusses treatment options with Rafael Perez, M.D.

cient and the staff accommodating. Drs. Perez and Geronemus presented her with several options, explaining each in detail. She decided on a robot-assisted hysterectomy, which typically results in less scarring and postoperative pain and a quicker return to normal activities than a traditional hysterectomy.

Before going to the Center, "I wasn't aware of all the methods and technology," Ms. Mitchell said. "Now that I've learned so much, it helped in making my decision."

To contact the Fibroid Center, call **786-662-8585**. —Liz Doup

BREAST MRIs MAY SAVE LIVES Annual MRIs plus mammograms and breast exams may help save lives of women at high risk for breast cancer — those with mutations in the BRCA1 or BRCA2 genes or with a family history of breast cancer. A Dutch study published in *The Journal of Clinical Oncology* is the first to measure whether adding MRIs to mammography screening increases survival.

In 2,157 high-risk women, researchers found that after six years of the combined screenings, 93 percent of those with the gene mutation were alive, compared to 74 percent who were alive at five years in earlier studies without MRIs. In women with the BRCA1 mutation, MRI was superior to mammograms in finding cancer. All of those with family histories of breast cancer were still alive after six years.

In recent years, annual breast MRIs along with mammograms have been recommended for those at increased risk for breast cancer. MRI is better at finding tumors, but mammography is also needed to detect cancers missed by MRI. Breast MRIs are not advised for women with average risk because of the chances for finding abnormalities that aren't cancer, leading to unnecessary biopsies and repeat scans.

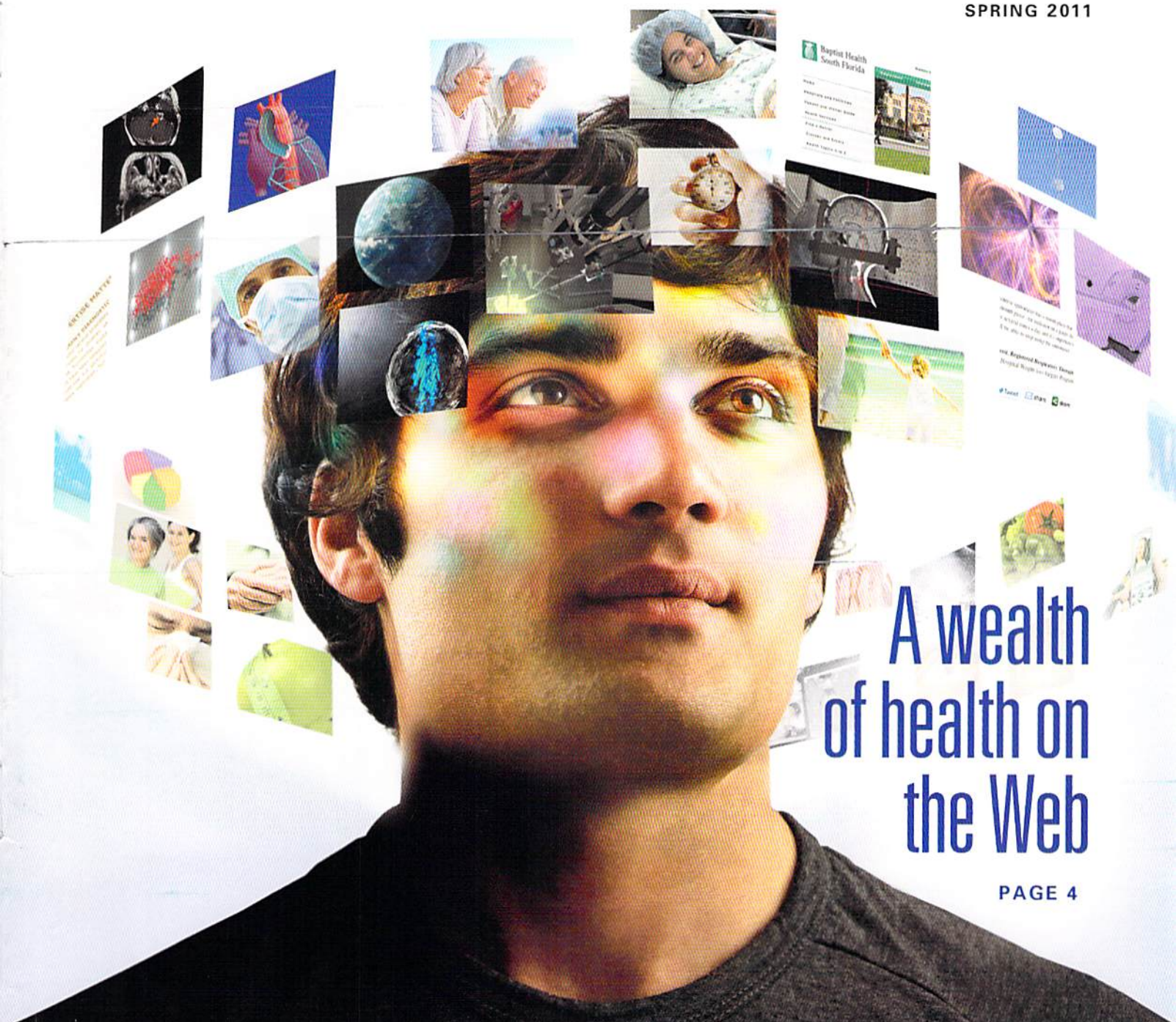
Talk to your doctor about what breast cancer screening regimen is best for you. A prescription is needed. To make an appointment, call **786-573-6000** in Miami-Dade, **954-837-1000** in Broward or **305-434-1588** (mammography only) in Monroe County.

—Anne Streeter

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