



CHRISTINE JEGAN

PATIENT PROFILE

Holly Tranzor

Holly Tranzor knew something was wrong when she did sit-ups faithfully but her belly grew larger instead of getting flatter.

It got to the point where the Vallejo resident, then 37, couldn't bend over to put on her gym socks without feeling discomfort.

Tranzor, who was also suffering fatigue, knew she had uterine fibroids. After years of increasingly severe menstrual periods, she had researched her condition on the Internet and in 1990 began to consult physicians in the community to monitor her condition.

Fibroids are nodules that develop within the muscle wall of the uterus of some women during their childbearing years. Although most women will have no symptoms, some experience excessive or painful bleeding during menstruation, bloating in the abdomen and low back pain. Fibroids contribute to infertility and are diagnosed in African American women three times more often than in white women. About 70 percent of women will have fibroids by their late 40s.

Current treatments for symptomatic fibroids include myomectomy, a surgery that removes only the fibroids and leaves the uterus intact; uterine artery embolization, a procedure that starves the fibroids of blood supply so they shrink; and hysterectomy, removal of the uterus. Fibroids account for 200,000 hysterectomies and 30,000 to 40,000 myomectomies each year in the US.

The oldest of four sisters, Tranzor comes from a family of women with fibroids. Her mother and her mother's sisters commiserated, supporting Tranzor's desire to avoid a hysterectomy and preserve her option for pregnancy. Most of the doctors she saw said the same thing: "Wait and see."

"Finally," she said, "I went for a regular physical one Friday and they found out I was so anemic they wanted to do a transfusion the same day. And that's when I realized it was serious."

Instead of a transfusion, she arranged with the doctor to spend the weekend taking iron supplements and eating iron-rich foods, including liver, beef and collard greens. "I ate cream of wheat three times a day all weekend," Tranzor said.

By Monday that regimen brought her red blood cell count back into the safe zone.

In April 2001, a community physician found the fibroids had grown so dramatically she felt she could no longer perform a myomectomy for Tranzor, offering her a hysterectomy — or, as an alternative, a referral to the Comprehensive Fibroid Center at UCSF Women's Health. Two

weeks later, she had her first appointment with Alison Jacoby, MD, director of the Fibroid Center.

"Holly had the most and biggest fibroids I had ever seen," said Jacoby, an assistant clinical professor of obstetrics, gynecology and reproductive sciences at UCSF Medical Center.

Although selecting the appropriate treatment depends on factors including size, location and number of fibroids, increasingly patients want to keep their uteruses even if they have completed childbearing.

"It's very common for a woman to come for a second opinion because her doctor said she had no safe option other than hysterectomy," Jacoby said. "But for doctors experienced in removing the fibroids rather than the uterus, the patient's surgical risk is actually very low."

Patient care at UCSF's Comprehensive Fibroid Center is carefully coordinated to assure the most appropriate treatment and follow-up. Uterine artery embolizations are performed by a specialist in interventional radiology, part of the collaboration Jacoby called essential to the center's approach. In 2003, the center expects to perform about 50 uterine artery embolizations, 60 myomectomies and 30 hysterectomies.

Regardless of treatment, all Fibroid Center patients are evaluated and counseled by Jacoby. "My mom, my sister and I went together and had all our questions answered," Tranzor said. "After the consultation, I believed that Dr. Jacoby was God-sent and I had full confidence. A burden was lifted from my shoulders."

Tranzor scheduled her surgery to coincide with the Thanksgiving break from her graduate studies. It took nearly six hours for Jacoby to meticulously remove the 21 fibroids that had expanded Tranzor's uterus and were pressing on her rib cage. The fibroids varied in size, but the largest was 12 centimeters — about the size of a cantaloupe.

With help from her family Tranzor's recovery went smoothly. Today, Tranzor, 39, works as an underwriter for a major insurance company. Her menstrual cycle is normal and she has more than enough energy to work out.

"I don't know if I can carry children," she said, "but at least I still have the option. Dr. Jacoby gave me hope, and hopefully I'll be able to get married and have kids one day — soon."

EVE HARRIS

For more information about the Fibroid Center or women's health, please call 885-7788.