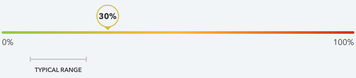
Uterine Fibroids

POWERED BY 23ANDME RESEARCH

Uterine fibroids are a relatively common type of non-cancerous growth in the uterus. Not all fibroids cause symptoms, but some can cause heavy menstrual bleeding, pelvic pressure, or pain.

Jamie, your genetic result is associated with an **increased likelihood** of developing uterine fibroids.

An estimated **30%** of females with genetic results like yours develop uterine fibroids **by their 60s**. This is based on data from 23andMe research participants of European descent.

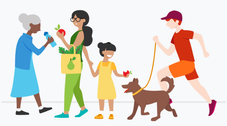


This estimate is based on currently available data and may be updated over time.

Ways to take action

Your overall likelihood of developing uterine fibroids also depends on other factors, including lifestyle. Research is ongoing, but experts agree that healthy lifestyle habits may help lower the chances of developing uterine fibroids.

- Maintain a healthy weight
- Limit alcohol consumption
- Diet: Some research has found a lower risk of uterine fibroids in people who eat more fresh fruits and vegetables, limit red meat, and get plenty of vitamin D from sources like dairy.



About uterine fibroids

What are uterine fibroids?

Uterine fibroids are non-cancerous growths in the uterus. They can vary in size, number, and location within the uterus. The exact cause of uterine fibroids is still unknown, but studies suggest genetics play an important role because fibroids tend to run in families. Reproductive hormones likely play a role too because many women report less bothersome symptoms after the onset of menopause.

How can uterine fibroids impact your health?

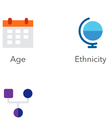
Uterine fibroids often cause no symptoms, but depending on the size, number, and location of fibroids in the uterus, symptoms can vary and may include:

- Heavy menstrual bleeding
- Pain or pressure near the pelvis or low back
- Constant urge to urinate or difficulty emptying the bladder
- Infertility or pregnancy complications

In some cases excessive menstrual bleeding may also lead to anemia.

Other factors that can impact your chances of developing uterine fibroids

- Age (uterine fibroids are most likely to be diagnosed in people's 30s and 40s)
- Ethnicity (people of African descent have increased chances)
- Family history (people with a first-degree relative with uterine fibroids have increased chances)



Keep in mind

This report **does not diagnose** uterine fibroids. **Consult with a healthcare professional** if you are concerned about your likelihood of developing uterine fibroids, have a personal or family history of uterine fibroids, or before making any major lifestyle changes.

If you have already been diagnosed with uterine fibroids by a healthcare professional, it is important to **continue any treatment plans** that they prescribe, including medications and lifestyle modifications.

The likelihood of developing uterine fibroids also depends on **other factors**, including age, family history, and lifestyle habits.

This report **does not account for every possible genetic variant** that could affect your likelihood of developing uterine fibroids.

This report is based on a genetic model **created using data from 23andMe research participants**. It has not been clinically validated and should not be used to make medical decisions.

How we got your result

Methods

This report is based on a statistical model that takes into account your genetic results at more than 1,800 genetic markers, along with the ethnicity and sex you reported in your account settings, to estimate the likelihood of developing uterine fibroids. We used data from female 23andMe research participants to calculate this estimate. Results and estimates may be updated over time as the model or scientific understanding about this condition improves.

About the result

Females whose result is associated with odds of developing uterine fibroids that are at least 1.5 times higher than average are considered to have an increased likelihood. Between 9% and 12% of individuals receive an "increased likelihood" result, depending on ethnicity. These results are based on many genetic markers, and random test error at one or more of these markers can lead to a small margin of error in your estimated likelihood of developing uterine fibroids. For females whose estimates are near the boundary between typical and increased likelihood, this margin of error may introduce some uncertainty about whether their estimated likelihood is considered "typical" or "increased". Your genetic result is associated with an increased likelihood. Based on the available genetic markers used to calculate your result, there is a less than 1% chance your genetic likelihood estimate could fall on the other side of the boundary and be in the range that is considered typical.

Scientific validity across ethnicities

We verified that the model meets our scientific standards for individuals of European, Hispanic/Latino, East/Southeast Asian, South Asian, Sub-Saharan African/African American, and Northern African/Central & Western Asian descent.

How we may use ethnicity and sex to customize this result

- If you indicated in your account settings that you are of European, Hispanic/Latino, East/Southeast Asian, South Asian, Sub-Saharan African/African American, or Northern African/Central & Western Asian (Middle Eastern) descent, your result is tailored based on data from individuals of that ancestry.
- Otherwise, your result may be based on data from individuals of European descent because there is not enough data from individuals of your ancestry at this time. Data from individuals of European descent is used because the most data is available for this population.
- Your Uterine Fibroids result also takes into account the sex you indicated in your account settings.

See our **white paper** to learn more about the science behind this report.

Read More:

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