**Healthy Womb (Uterus) - A must for healthy preganancy**

UTERINE CONDITIONS

 



**KEY POINTS**

* Some uterine conditions cause no problems during pregnancy.
* Other uterine conditions can make it hard for you to get pregnant, and some can cause problems like miscarriage or premature birth.
* For some conditions, treatment is needed to help improve your chances of having a healthy pregnancy.

What are uterine conditions?

The uterus (also called the womb) is the place inside you where your baby grows. Certain conditions (called abnormalities or defects) in your uterus can cause problems before and during pregnancy.

What are congenital uterine conditions?

Congenital means that something is present at birth—it’s something you’re born with. About 3 in 100 females (3 percent) are born with a defect in the size, shape or structure of the uterus.

When a baby girl is developing in the womb, two small tubes call Mullerian ducts come together at about 10 weeks gestation (10 weeks of pregnancy) to form her uterus. For some baby girls, the Mullerian ducts don’t come together completely. This can cause problems with the uterus, including:

* **Septate uterus.** This is the most common congenital uterine abnormality. In this condition, a band of muscle or tissue (called a septum) divides the uterus into two sections. This condition can cause women to have repeat miscarriages, so health care providers often recommend surgery to repair the uterus and reduce your risk o[f miscarriage](https://www.marchofdimes.org/complications/miscarriage.aspx). Miscarriage is the death of a baby in the womb before 20 weeks of pregnancy. Repeat miscarriage means a woman has two, three or more miscarriages in a row.
* **Bicornuate uterus** (also called heart-shaped uterus). In this condition, the uterus has two cavities (spaces) instead of one large cavity. Most women with this condition don’t need surgery to repair it.
* **Didelphic uterus** (also called double uterus). In this condition, there are two small, separate cavities, each with its own cervix (opening).
* **Unicornate uterus** (also called one-sided uterus). This condition happens when only half the uterus forms. Surgery can’t make the uterus any larger.

Can congenital uterine conditions cause problems during pregnancy?

Yes. Some may not cause any problems at all. But some may increase your chances of having these complications:

* [Premature birth](https://www.marchofdimes.org/complications/preterm-labor-and-premature-birth-are-you-at-risk.aspx). This is birth that happens too early, before 37 weeks of pregnancy.
* [Birth defects](https://www.marchofdimes.org/complications/birth-defects-and-health-conditions.aspx) (called deformation birth defects) that may be caused by restricting (limiting) growth of parts of a baby in the womb causing those parts to be deformed. Birth defects are health conditions that are present at birth. Birth defects change the shape or function of one or more parts of the body. They can cause problems in overall health, how the body develops, or in how the body works.
* Slow growth in your baby
* Breech position or other problems with the baby’s position in the womb. Breech position is when your baby's bottom or feet are facing down right before birth. The best position for birth is when your baby is head-down.
* Needing to have a [cesarean birth](https://www.marchofdimes.org/pregnancy/having-a-c-section.aspx) (also called c-section). This is surgery in which your baby is born through a cut that your doctor makes in your belly and uterus.
* Miscarriage

What are fibroids?

Fibroids are benign growths made of muscle tissue in the uterus. Benign means that they aren’t cancer. They are an acquired uterine condition. This means you’re not born with fibroids; instead, they develop later in life.

Small fibroids usually don’t cause problems during pregnancy, but larger fibroids may cause complications, including:

* Trouble getting pregnant (also called infertility)
* [Preterm labor](https://www.marchofdimes.org/complications/signs-and-symptoms-of-preterm-labor.aspx). This is labor that starts too early, before 37 weeks of pregnancy.
* Your baby being in a breech position. This may make it necessary for you to have a c-section.
* [Placental abruption](https://www.marchofdimes.org/complications/placental-abruption.aspx). This is a serious condition in which the placenta separates from the wall of the uterus before birth.
* Miscarriage
* [Heavy bleeding after giving birth](https://www.marchofdimes.org/pregnancy/postpartum-hemorrhage.aspx)

You may have fibroids if you have these signs and symptoms:

* Heavy periods
* [Anemia](https://www.marchofdimes.org/complications/anemia.aspx). This is when you don't have enough healthy red blood cells to carry oxygen to the rest of your body.
* Pain in your belly or your back
* Pain during [sex](https://www.marchofdimes.org/pregnancy/sex-during-pregnancy.aspx)
* Trouble urinating or having to urinate often

Some women with fibroids may need to be treated with medicine for pain in the belly and back. If your health care provider thinks fibroids are causing you to have trouble getting pregnant or to have repeat miscarriages, she may recommend surgery (called myomectomy) to remove them.

What are uterine scars?

These are scars or scar tissue in the uterus. They’re also called Asherman syndrome. The scars can damage the lining of the uterus called the endometrium. They’re acquired conditions that can be caused by an infection called endometritis or by surgery on the uterus or cervix, like a procedure called dilation and curettage (also called D&C). Many women have a D&C after a miscarriage to remove tissue from the uterus.

Signs and symptoms of uterine scars include light or infrequent periods; but some women have no signs or symptoms. The scars can cause trouble getting pregnant, premature birth and repeat miscarriage. Your health care provider may use a procedure called hysteroscopy to find and remove scar tissue in the uterus. In this procedure, she inserts a thin, lighted tube (called a hysteroscope) through the vagina into the uterus.

How do you know if you have a uterine condition?

Your health care provider uses special tests to find these conditions. You may need more than one test to figure out which condition you have. The tests include:

* **Vaginal or 3-D**[**ultrasound**](https://www.marchofdimes.org/pregnancy/ultrasound-during-pregnancy.aspx)**.**An ultrasound is a prenatal test (a test that you get during pregnancy) that uses sound waves and a computer screen to show a picture of your baby inside the womb. A vaginal ultrasound is done in the vagina instead of on the outside of your belly. A 3-D ultrasound makes an image that’s almost as clear as a photograph.
* **Sonohysterogram.** In this test, your health care provider puts salt water into the uterus through the cervix and then does a vaginal ultrasound. The salt water allows a clearer picture of the inside of the uterus than a regular ultrasound. The cervix is the opening to the uterus that sits at the top of the vagina. You get this test when you’re not pregnant.
* **Hysterosalpingogram.** In this test, your health care provider inserts dye into the cervix and then takes an X-ray of the uterus. With this test, your provider can check your cervix, uterus and fallopian tubes. Fallopian tubes are the tubes between your ovaries and your uterus. You get this test when you’re not pregnant.
* **Magnetic resonance imaging** (also called MRI). MRI is a medical test that makes a detailed picture of the inside of your body. It’s highly accurate in diagnosing most uterine abnormalities. You get this test when you’re not pregnant.

If these tests show you have a problem with your uterus, your health care provider may recommend surgery, especially if you’ve had a miscarriage or premature birth in the past.

What is a retroverted or tipped uterus?

A retroverted uterus is when your uterus tips backward instead of forward. It’s a common condition that about 1 in 5 women (20 percent) have. You can be born with it (congenital), or it can develop later in life (acquired). A tipped uterus rarely causes pregnancy complication