Magnetic resonance imaging-guided focused ultrasound: no panacea, but nevertheless a safe step forward

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No single therapy can currently or for the foreseeable future treat all uterine fibroids. Innovations need to use technology to optimize safety and efficacy. (Fertil Steril 2006;85:49. ©2006 by American Society for Reproductive Medicine.)

We agree wholeheartedly with Drs. Bachmann, Munro, and Pron that there is no panacea for uterine fibroids (1–3). We support continued research on new interventions and suspect that investigation of fibroid biology will optimize therapy.

We also agree with Dr. Pron’s contention that interdisciplinary collaboration is vital for optimization of fibroid care (3). We are proud of the collaboration between radiologists and gynecologists in the development of magnetic resonance imaging guided focused ultrasound (MRgFUS).

Furthermore, we agree with Dr. Munro that more studies are needed to demonstrate the long-term efficacy of MRgFUS or any treatment technique (2). The women reported in this trial and several hundred additional women are being observed for 3 years. Increases in operator experience and technological innovation will likely lead to improved outcomes over time, as gynecologists have witnessed with laparoscopic and hysteroscopic techniques.

We would, however, respectfully disagree that there are safety issues with MRgFUS. The U.S. Food and Drug Administration (FDA) makes patient safety a clear priority, and there were few safety concerns discussed at the FDA panel hearing (transcript available at: http://www.fda.gov/ohrms/dockets/ac/04/transcripts/2004-4046t1.htm).

Innovation is difficult in any field, but the stakes are higher for surgical innovation. Positioning yourself at the leading edge, yet not at the bleeding edge, is difficult, but technology can and will aid this process. MRgFUS gives the surgeon more information than he or she has with vision and tactile sensation alone, by monitoring temperature and imaging beyond the targeted organ. Treatment data are also captured to allow retrospective analysis in a novel way. We welcome both optimization of current techniques and new techniques to benefit our daughters and granddaughters.

REFERENCES