

Sonohysterography

What is a sonohysterography and how is it performed?

A sonohysterography is an ultrasound evaluation that allows the doctor to study the endometrial cavity.

The first step is to gently insert into the vagina a speculum in order to visualize the cervix. Then a thin sterile plastic catheter is inserted through the opening of the cervix into the uterus. After the vaginal speculum is removed, with the catheter remaining inside.

Next, the trans-vaginal ultrasound is performed to visualize the endometrial cavity via introducing a small amount of sterile saline into the catheter.

At the end of the exam both the internal probe and the catheter are removed.

Indications to the examination:

- suspicion of endometrial pathology (such as a polyp);
- investigation of premenopausal or postmenopausal bleeding;
- assessing the thickness of the endometrium;
- investigation of couples sterility;
- pre-operative evaluation to an hysteroscopy.

Feasibility of the exam

According to data in literature, up to the 15% of cases the examination is not possible. Limitations to the procedure are: severe cervical stenosis (this doesn't allow the introduction of the catheter into the uterus), cervical insufficiency, multiple fibroids, local pain that might lead the doctor to stop the procedure.

Does a sonohysterography require a specific preparation?

The best time to perform a sonohysterography in young women is during the follicular phase, just after the period has finished, before the ovulation (before the 10°-12° day of the cycle in women with regular cycles). In postmenopausal women the examination can be performed at any time. Absolute contraindications to the exams are: state of pregnant, pelvic inflammatory disease, pyometra (uterine infection associated with pus in the womb).

Relative contraindications are: cervical stenosis, vaginitis and endometritis.

Premedication with NSAIDs (aspirin, ibuprofen, naproxen, etc.) and/or antibiotics is not required.

Is it painful? Can complications occur?

Usually the sonohysterography is easily performed, well tolerated and with a low risk of complications. The level of pain is commonly minimal. Other observed symptoms are nausea, vomiting and vaginal bleeding. Rarely fever and/or peritonitis can occur requiring antibiotics prescription.

Are there any limits with this exam?

Diagnostic accuracy of the sonohysterography is high but not absolute. Sometimes further tests may be required to complete the endometrial evaluation (for example biopsies with intra-uterine catheters or an hysteroscopy).

Informed consent
I, the undersigned,confirm that I fully understand what has been explained to me by Doctor and hereby give my consent to undergo the proposed diagnostic and/or therapeutic procedure.
I am aware of the aim of the examination, of the modality, of the diagnostic accuracy, of the limits and adverse effect related.
I have been told that:
• a sterile plastic catheter will be introduced into the uterus;
• a sterile saline solution will be used as contrast material;
• a trans-vaginal ultrasound will be performed.
I declare that I am aware of the adverse events (pelvic pain, nausea, vomiting, vaginal bleeding, fever) and of the possible alternatives available (hysteroscopy).
I therefore:
 Give my consent to the examination Do not give my consent to the examination
Date / /
(Patient's signature)
(Doctor's signature and stamp)