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## Evaluation of the Uterus

If you haven't been able to conceive after 6 months of unprotected intercourse, certain tests are ordered to determine the cause. Apart from testing your hormones, reproductive organs and your partner's sperm, a thorough evaluation of the uterus is also considered. The uterus is examined to ensure that there is no problem that could stop the implantation and growth of a fertilized egg.

### What are the different methods used to examine my uterus?

Your doctor can use one of the below methods to evaluate your uterus.

- Vaginal ultrasound: A vaginal ultrasound uses sound waves to create an image of the walls and lining of the uterus as well as the ovaries on a screen. The probe used in a vaginal ultrasound is similar to a tampon and is inserted inside your vagina to obtain images.
- Sonohysterogram (saline infusion sonogram): This is a type of vaginal ultrasound where a small amount of sterile saline is introduced into your uterus through a thin plastic tube. A sonohysterogram helps your doctor examine the shape of the uterine cavity (space inside of the uterus).
- Hysterosalpingogram (HSG): This test examines the uterus along with the fallopian tubes. A special dye is injected into your uterus and an X-ray is taken. The X-ray detects the path of the dye, allowing your doctor to view the shape of the uterine cavity and detect any blocks in the fallopian tubes. During this test, you may experience mild-to-severe cramping.
- Hysteroscopy: Hysteroscopy involves the insertion of a narrow telescope attached to a camera (hysteroscope) through the cervix to obtain a clear view of the uterus. It can be used to diagnose as well as treat certain conditions and can be performed with a mild pain medication in the office setting or under anesthesia in a surgery center.

### How is hysteroscopy performed?

Hysteroscopy can be used as a diagnostic as well as therapeutic tool.

**Diagnostic hysteroscopy:** Hysteroscopy is used to diagnose many conditions of the uterus. The hysteroscope is then inserted through the cervix into the uterus. The images captured by the hysteroscope can be viewed by you and your doctor on a monitor. Once the diagnosis is complete, the hysteroscope is carefully removed and you will be able to resume your normal activities. You may experience some spotting or discharge of watery fluid from your vagina following the test.

**Operative hysteroscopy:** Hysteroscopy can also be performed to remove abnormal tissue causing bleeding or fertility problems. As a therapeutic method, the procedure uses a hysteroscope that is larger than the one used for diagnosis and is performed under anesthesia in an operating room. The entire procedure takes about 1 hour to complete. You may experience some discomfort following the procedure. You are advised not to swim, take a bath, have intercourse or place anything in your vagina for up to 2 weeks to allow the dilated cervix to regain its normal position and lower the chances of infection.

### **What are the conditions that can be diagnosed and treated with hysteroscopy?**

Hysteroscopy is indicated for

- Endometrial polyps (small growths on the uterine lining)
- Uterine fibroids (noncancerous growths on the uterine wall)
- Scar tissue or adhesions inside the uterus
- Uterine septum (tissue dividing the uterus in half)

These conditions can cause heavy bleeding, infertility and high rates of miscarriage.

### **Are there any risks associated with hysteroscopy?**

Hysteroscopy is generally a safe procedure. However, as with any procedure, there are chances of infection and scar tissue formation. Bleeding after the procedure is common, but heavy bleeding requires immediate medical attention. The fluid used by a hysteroscope to allow clear vision of the uterus can get absorbed into the blood. Apart from this, in rare cases, the scope can perforate the uterus. Small perforations usually heal by themselves but larger ones can injure other organs such as the bladder, blood vessels and intestine, requiring another procedure called laparoscopy to rectify the problem.