

Hysteroscopy

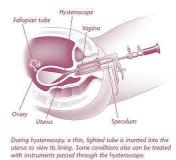
What is hysteroscopy

Visualisation of the inner cavity of the uterus through a small video telescope- like device passed into the uterus through the vaginal passage under general anaesthesia is called Hysteroscopy.

What are the types of hysteroscopy?

Basically two types

- a) Diagnostic -- when used to diagnose a problem e.g.heavy bleeding
- b) Operative -- when an operative procedure is contemplated e.g.intrauterine septum



When do I need hysteroscopy?

Your doctor may advise hysteroscopy if:

- you are experiencing abnormal uterine bleeding and the doctor wants to look for the cause, like fibroids or polyps.
- he suspects presence of adhesions from an infection or from a past surgery, if there is a septum or shape of the uterus is abnormal or in cases of infertility

Hysteroscopy is also used to diagnose recurrent miscarriages and to locate misplaced *intrauterine device (IUD)*

How can hysteroscopy be used in treatment?



As we learnt earlier, certain conditions can be treated soon after diagnosis. The doctor can insert operating tools, such as, scissors, cautery devices or a laser fiber into the hysteroscope.

For example, in case the doctor finds fibroids or polyps in the uterus, he can use the relevant tool to remove the same. If no growth is found, a tissue sample can be obtained for *biopsy*. Small scissors or a wire loop may be used for biopsy or any other procedure to be carried out based on the findings.

The hysteroscope is also valuable in treating some forms of tubal occlusion.

Contraindications

Your doctor will not perform hysteroscopy if you are pregnant, if you have a vaginal or urinary tract infection, or if you have known cancer of the uterus.

Pre procedure preparation

Diagnostic hysteroscopy is a minor surgery. Along with this surgery, other surgeries such as laparoscopy may be done depending on the case.

You will be advised to undergo some basic preoperative investigations. You may be advised to use some tablets or cream for vaginal use few hours prior to procedure. This is usually done to soften the mouth of uterus and facilitate the insertion of telescope in the uterus . This procedure is done under general anaesthesia

Procedure

A *speculum* is first inserted into the vagina. The cervix or the mouth of the uterus is widened by using dilators. The hysteroscope is then inserted and gently moved through the cervix into your uterus. Carbon dioxide gas or a fluid, such as saline will be put through the hysteroscope into your uterus to expand it and view the lining more clearly.

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The amount of fluid used is carefully checked throughout the procedure. Your doctor can see the lining of your uterus and the openings of the fallopian tubes by looking through the hysteroscope.

Recovery

You may be allowed to go home shortly after the procedure.

If you were given general anesthesia, you may need to wait until its effects have worn off, this is usually around 4-5 hours. It is normal to have mild cramps or a little bloody discharge for a few days after the procedure. Your doctor may give you a medication to help ease the pain. If you have a fever, chills, or heavy bleeding, call your doctor's office right away.

Talk to your doctor about when you can get back to your normal activities at work or home.

Risks

Hysteroscopy is safe procedure. There are few risks as with any other procedure. The procedure of dilatation of the cervix is a blind procedure. There is a small chance that the instrument may cause perforation of the uterus. Injury to other abdominal organs such as urinary bladder and intestines is rare. If the fluid in excess quantities gets absorbed from the uterus it may cause problems. However, this problem is also uncommon. Excessive bleeding is uncommon.

Finally...

To summarise, hysteroscopy allows your doctor to see the inside of the uterus and diagnose some medical problems. Some of these conditions can be treated during hysteroscopy. The procedure and recovery time is certainly faster in most cases.