

The endoscopic management of uterine synechiae. A clinical study of 78 cases

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Abstract

Intrauterine adhesions (IUA) are easily diagnosed by hysteroscopy, which also offers the main method for treatment. In this study, we analyze the value of the method.

Material and methods: We have selected 78 cases of IUA diagnosed during a 3 year period. In cases when interventions were needed, we used mechanical techniques (pushing, scissors, forceps) or electrical resection, addressed to synechiae and other concomitant pathologies (fibroids, polyps). The follow-up ranged between 3-6 months (for amenorrheic patients) and 6-12 months for infertility patients.

Results: In our 78 cases the presenting diagnostic was synechiae (44%), irregular cycles (19%), amenorrhea (16%), infertility (15%). Hysteroscopy allowed the IUA extension evaluation, and the majority of cases had early stage disease. From them 60% had therapeutic gestures, with success criteria being: visualization of both tubal ostium- in 70%, clinical normal cycles (91%) and pregnancy in 5 cases (41% from patients addressed mainly for infertility). There was one perforation in an Ashermann syndrome case, with no further surgical gestures needed. The main postoperative treatment was hormonal treatment, in all cases. In conclusion, although hysteroscopy allows easy diagnostic for IUA, therapeutic gestures should be done in severe cases by experimented specialists.

Key words: intrauterine adhesion, infertility, endoscopy, hysteroscopy

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