Operative hysteroscopy for subfertile patients with septate uteri

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Context: hysteroscopic metroplasty, subfertile patients

Objective: Evaluations of the reproductive outcomes of women with infertility or recurrent miscarriage following different methods of hysteroscopic metroplasty.

Methods: prospective randomized investigation.

Patients: The cohort of 76 non-parous patients with primary infertility or recurrent miscarriage with septate uterus was treated for a hysteroscopic metroplasty.

Interventions: The first group of patients (n = 38) underwent transcervical hysteroscopic intrauterine septum resection with a monopolar semicircular 0° cutting loop. The second group of women (n = 38) underwent hysteroscopic intrauterine septum incision using monopolar knife electrode. There were no significant differences in primary or secondary infertility and miscarriages rates between patients.

Main Outcome Measures: The operation time was (34,5±7,8) min in the 1st group and (25, 4+6,2) min in the 2nd group, intraoperative blood loss was (20,2+5,3) ml and (15,2+3,5) ml respectively. Simultaneous laparoscopy was performed in 15 (39,5 %) cases in the 1st group and 13 (34,2 %) cases in 2nd group. No intrauterine devise neither estrogens were used in both groups.

Results: Outcomes including the numbers of pregnancies, live births and miscarriages were determined. At 15 months follow-up after metroplasty, 22 women (57,9%) became pregnant in 1st group and 18 (47,3 %) in the 2nd group. Live birth rate was 17 (44,7 %) and 11 (28,9 %) cases and abortion rate was 5 (13,2 %) and 7 (18,4 %) cases respectively. Thirteen (34,2%) pregnancies in the 1st group and 15 (39,5 %) in the 2nd group resulted from assisted reproductive technologies.

Conclusions: The method of intrauterine septum resection by loop in comparison of septum incision by monopolar knife demonstrate tendency of improving live birth rate and decreasing the miscarriages rate.