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.