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TITLE

EFFECTIVENESS OF HYSTEROSCOPIC TRANSCERVICAL RESECTION OF UTERINE SEPTUM (HTCRS) IN IMPROVEMENT OF REPRODUCTIVE OUTCOMES : MISURATA EXPERIENCE

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ABSTRACT

OBJECTIVE: To evaluate efficacy and safety of HTCRS in improvement of pregnancy outcomes in women with history of infertility, recurrent miscarriages (RM) or premature birth.

PATIENTS AND METHODS: Retrospective descriptive study of 210 patients who underwent HTCRS from March 2012, through January 2015. Patients aged from 24 to 39 years: 162 with primary infertility, 34 with secondary infertility & 14 with histories of RM (> 2). Procedures performed within 3-5 days after menstruation end. Surgery performed under Laparoscopic supervision. Follow-up HSG & hysteroscopy after 3 months, if inadequate resection, surgery repeated. Moist exposed burn ointment used in prevention of de novo intrauterine adhesions. Reproductive outcomes and early or late complications within one year after surgery were evaluated. Statistical analysis performed using SPSS packages for Windows. P-value significant if (< 0.05).

RESULTS: Septum completely removed during first time HTCRS in 198 patients, 12 patients required additional intervention. Neither immediate nor late complications were encountered. 32 (15.2%) patients lost in follow up. Out of 178 patients, pregnancy achieved in 139 (78.08%): 74 (53.23%) naturally, 21 (15.10%) after IUI and 44 (31.65%) following ART. Patients ended in miscarriages; 27 (19.4%): 14 (31.81%) post ART, 4 (19.04%) after IUI and in 9 (12.16%) women conceived spontaneously. 103 (74.10%) infants born at term, 9 (6.47%) born premature. No ectopic pregnancies recorded. Rates of miscarriage and preterm labour reduced as compared to before surgery (P<0.0004 & P<0.0011) respectively. No significant difference between age, BMI, infertility type and duration.

CONCLUSIONS: HTCRS is safe and effective in management of patients with infertility and RM, significantly improving reproductive outcomes by reducing both miscarriage rate,& preterm labour..

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