

Pictorial essay of hysterosalpingography

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Abstract

Hysterosalpingography was main investigation in pre USG and pre MRI era in the treatment of infertility. Even now it is still one of the important investigation in the treatment of infertility. We present the many appearances of uterus – Norman and Abnormal as seen on Hysterosalpingography.

Keywords: Hysterosalpingography, Uterine malformation, Fallopian tube and patency.

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INTRODUCTION

Examination of uterus & its adnexa by HSG is not a new procedure, although many variations of technique have been described since Semenov first outlined the uterus with Lugol's Iodine in 1909. HSG has gradually become accepted as valuable and often essential part of investigation of various gynaecological conditions. We present the spectrum of appearances of Uterus and Adnexa as seen on Hysterosalpingography.

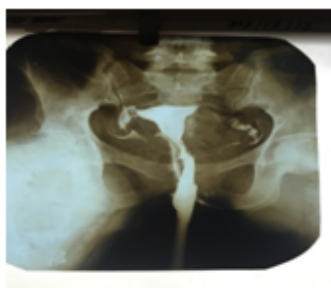


Figure 1



Figure 2



Figure 3



Figure 4



Figure 5



Figure 6



Figure 7



Figure 8

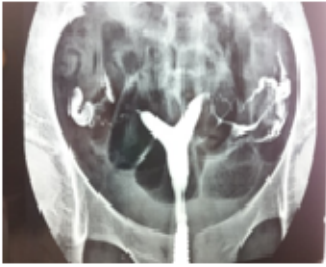


Figure 9

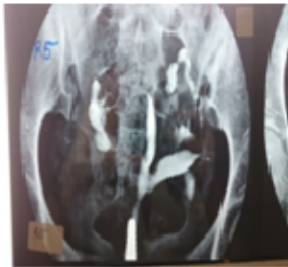


Figure 10



Figure 11



Figure 12



Figure 13

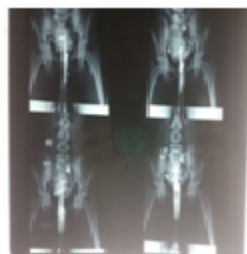


Figure 14



Figure 15

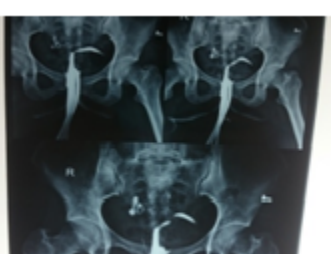


Figure 16



Figure 17



Figure 18

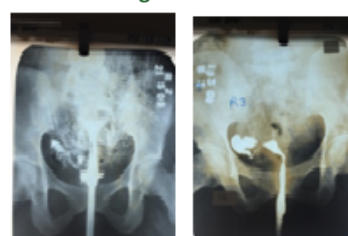


Figure 19



Figure 20

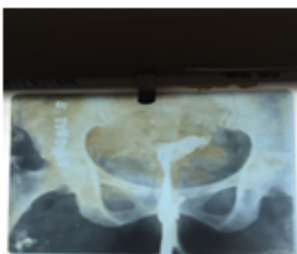


Figure 21



Figure 22

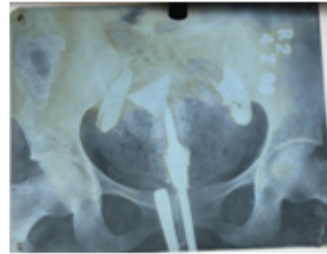


Figure 23



Figure 24

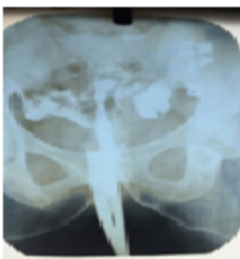


Figure 25

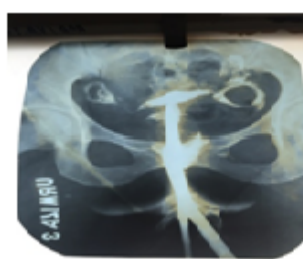


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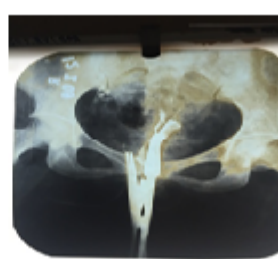


Figure 27



Figure 28



Figure 29



Figure 30



Figure 31

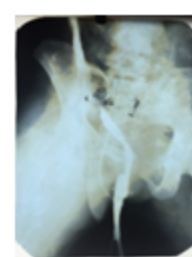


Figure 32



Figure 33



Figure 34



Figure 35

Figure 1: Normal HSG

Figure 2: Small size uterus with B/L tubal block mid portion .

Figure 3: Bicornuate uterus with contracted cavities likely due to Koch's with B/L hydrosalpinx with venous intravasatio. Bicornuate Uterus with both tube patent

Figure 4: Arcuate shaped uterus with tubes are pulled upwards due to pelvic adhesions

Figure 5: Unicornuate uterus with proximal tubal block

Figure 6: Unicornuate uterus with mid portion block

Figure 7: Large size uterus with fibroid impression on right side

Figure 8: Bicornuate uterus with right fimbrial hydrosalpinx

Figure 9: Bicornuate uterus with B/L inflammatory changes in both lobes

Figure 10: B/L tubal block with venous intravasation

Figure 11: B/L tubal block

Figure 12: Small fibroid impression over the endometrial cavity with left tube pulled upward due to fibrosis

Figure 13: Uterus normal with fecolith shadow behind the uterus

Figure 14: Fecolith

Figure 15: Contracted uterine cavity with right hydrosalpinx left tube not filled up

Figure 16: Bilateral cornual block

Figure 17: Arcuate shaped uterus with left tube pulled upward

Figure 18: Normal HSG with cloth artifact (jurry of Dupatta)

Figure 19: Right hydrosalpinx with left cornual block Left cornual block

Figure 20: Left Hydrarosalpinx with Right cornual block

Figure 21: B/L Hy drosalpinx with impression over right uterine border

Figure 22: B/L Hydrosalpinx with block

Figure 23: Arcuate shape uterus with left cornual block

Figure 24: B/L Hydrosapinx-tuberculosis

Figure 25: Left ovarian cyst tube encircling over the cyst.right fimbrial block

Figure 26: Bicornuate uterus both cavities not well filled with tubal block

Figure 27: K/C/O Anti koch's treatment still complete tube blocks.

Figure 28: Bicornuate uterus with both tubes patent

Figure 29: Bicornuate uterus with both tube pulled upwards

Figure 30: Unicornuate uterus with tubal block

Figure 31: Unicornuate uterus and contrast going behind the ascending colon

Figure 32: B/L Fimbrial block with venous intravasation

Figure 33: Sub mucous small fibroid impression at the fundus with B/L tubal block

Figure 34: Normal HSG with arcuate uterus.

Figure 35: Normal HSG with arcuate uterus

CONCLUSION

With the advent of newer modalities of imaging as well as the various types of scopes, is it the time to think twice the role and relevance of HSG as a routine investigation of infertility? We feel that if properly performed it is still a very useful investigation as far as infertility is concerned. It is safe & can be easily performed. A proper attention to technique will help make HSG a vital component in routine infertility investigation.

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