

## **HYSTEOSALPINGOGRAPHY (HSG)**

Hysterosalpingography (HSG) is an x-ray examination that is used to evaluate the uterine cavity and to check for patency of the fallopian tubes (whether the tubes are blocked).

### **INDICATIONS (REASONS FOR PROCEDURE)**

- Infertility (difficulty in conceiving).
- Confirm tubal and uterine abnormalities.
- Recurrent miscarriages.
- Follow-up to some surgical procedures.

### **CONTRA-INDICATIONS TO THE PROCEDURE**

- Undiagnosed vaginal bleeding.
- Pelvic inflammatory disease (PID).
- Pregnancy.
- Recent curettage or active genital tract infection.

### **PREPARATION FOR THE PROCEDURE**

- It is best to schedule the procedure following completion of menstrual flow and before the tenth day. Please discuss this with your doctor if you are unsure or if you suspect that you may be pregnant.
- No fasting is required. However, it is not advisable to take a full meal just prior to the procedure.
- You should inform the doctor if you have history of asthma, allergy to seafood, medications or contrast.
- Oral pain-killer medications may be given one hour prior to procedure.
- Call the hospital to schedule an appointment for this procedure once your menstrual flow starts. This is to enable the hospital to schedule it before your tenth day (counting from the first day of menstrual flow).
- Please abstain from unprotected sexual intercourse before the procedure or use a safe method such as condom.
- It is advisable to get an accompanying person to drive you home after the procedure.

### **DESCRIPTION OF PROCEDURE**

- The procedure is quick; usually takes about 15 to 20 minutes from start to finish.
- No specific anaesthesia is required. You will be conscious during the procedure.
- A speculum is inserted into the vagina and the cervix is grasped with a tenaculum (a hook like instrument). The cervix and vagina are cleansed with an antiseptic.
- A metal cannula or a disposable balloon catheter is inserted into the uterine cavity, and a dye (contrast medium) is slowly inserted into the uterus. X-rays are taken during the injection of dye. There may be some cramping or discomfort felt as the dye is injected. You may be asked to change positions for different x-ray views.
- The x-rays will show the outline of the uterus and fallopian tubes as the dye fills them and spills into the abdominal cavity.
- At the end of the procedure, all instruments are removed.
- The results will be available immediately.

**EXPECTED OUTCOME**

- Normal findings reveal a symmetrical uterine cavity, with the dye flowing through unblocked fallopian tubes, and there is no leak of dye from the uterus.
- The x-rays may help reveal abnormality in the shape/size of the uterine interior, scarring, tumors (fibroids), endometrial polyps or a blockage in the fallopian tubes.
- Conditions detected by the hysterosalpingogram may require further testing for confirmation; this may include a laparoscopy or hysteroscopy (use of a small lighted telescope to view internal organs).

**POSSIBLE COMPLICATIONS**

- Allergic reaction to the solution used in the test.
- Uterine perforation.
- Infection.

**POST PROCEDURE CARE**

- Mild cramping, a slow pulse, some nausea or dizziness may occur during or following the procedure. These are temporary.
- Expect some vaginal spotting after the procedure but no heavy vaginal bleeding. Also, the solution used to clean the vagina and cervix and some of the dye itself will leak out through the vagina after the procedure. Wear a sanitary napkin for one or two days.
- Antibiotics may be prescribed to prevent infection prior to or after the procedure.
- Following the procedure, mild painkillers medications can be continued if pain is present.
- There are no dietary or activity restrictions once any temporary symptoms disappear.

**SEE YOUR DOCTOR IMMEDIATELY IF YOU HAVE:**

- Increased pain in the lower abdomen or in the genital area.
- Signs of infection: headache, muscle aches, dizziness or general ill feeling and fever.
- Persistent or heavy vaginal bleeding.
- Persistent and abnormal vaginal discharge

**Disclaimer**

This is for informational purposes only and is not intended to be a substitute for professional medical advice, diagnosis, or treatment. It is important for readers to seek proper medical advice when necessary.

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