

Results



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This study comprised 20 infertile women, their ages ranged between 20-30 years with mean age $(26.15 \pm 3.2 \text{ years})$. 17 cases of them were primary in fertility (85%) with mean age $(25.6 \pm 3.2 \text{ years})$ and 3 cases were secondary infertility (15%) with mean age $(29.0 \pm 1.0 \text{ years})$ as shown in **table(1)**.

Table (1): Shows Mean $(\bar{x}) \pm \text{standard deviation (SD) of age}$

cases	N <u>o</u>	%	$\begin{array}{ c c c }\hline & age (y \\ \hline \hline x & \pm \\ \hline \end{array}$	ears) SD
1ry infertility	17	85.0	25.6	3.2
2ry infertility	3	15.0	29.0	1.0
total	20	100	26.15	3.20

Table (2): Shows comparison of Hy-CO-SY with HSG in term of tubal patency of the left side

Left tubes	HSG		HY-CO-SY	
	N <u>o</u>	%	N <u>o</u>	%
patent tubes	17	85.0	18	90.0
blocked tubes	2	10.0	2	10.0
no significant spill	1	5.0	-	-

As shown in **table (2)**, in cases of **Hy-CO-SY** there was 18 cases of left sided patency (90%) and 2 cases of left sided block (10%), while in cases of **HSG** there was 17 cases of left sided patency (85%), 2 cases of left sided block (10%) and one case showed no significant spill (5%).

In the left tube:

Sensitivity 66.7%

Specificity 100%

Positive predictive value 100%

Negative predictive value 94.4%

Accuracy 95%

 $X^2 = 12.95$

P < 0.001

Table (3): Shows comparison of HY-CO-SY with HSG in term of tubal patency of the right side

Right tubes	HSG		HY-CO-SY	
	N <u>o</u>	%	N <u>o</u>	%
patent tubes	18	90.0	18	90.0
blocked tubes	1	5.0	2*	10.0
no significant spill	1	5.0	· •	<u>-</u>

As shown in table (3), in cases of HY-CO-SY, 18 cases of right sided patency (90%) and 2 cases of right sided block (10%), *one of them showed false + ve result due to utero-tubal spasm. In HSG showed, 18 cases with right sided patency (90%), one case with right sided block (5%) and one case with no significant spill (5%).

In the right tube:

Sensitivity 50%

Specificity 94.4%

Positive predictive value 50%

Negative predicative value 94.4%

Accuracy 90%

$$X^2 = 9.47$$

P < 0.05

Table (4): Shows comparison between HY-CO-SY and HSG in term of uterine abnormalities.

Uterus	HSG		HY-CO-SY	
	N <u>o</u>	%	N <u>o</u>	%
casses with normal uterus	18	90.0	17	85.0
cases with abnormal uterus	2**	10.0	3*	15.0

As shown in table (4), **HY-CO-SY**, showed 17 cases of normal uterus 85% and 3* cases of abnormal uterus, 2* of them were small sized uterus and one* of them showed filling defect of the uterus, while in **HSG** there was 18 cases with normal uterus (90%) and 2** cases showed small sized uterus (10%).

In the uterus:

Sensitivity 100%

Specificity 94.4%

Positive predictive value 66.7%

Negative predictive value 100%

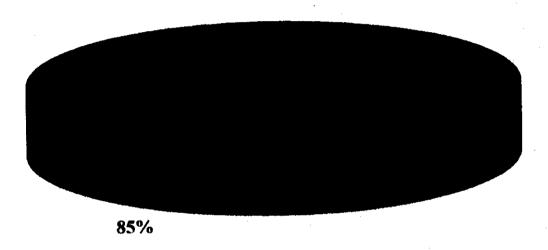
Accuracy 95%

$$X^2 = 12.59$$

P < 0.001

In the course of **HY-CO-SY**, no serious adverse effects as bradycardia, fainting, nausia, sweeting, hyperventilation and severe pain were observed during or after the procedure, while five cases (25%) had complained from tolerable pain which lasted for about 15-30 minutes and relieved without medication.





■ 2ry infertility

■ 1ry infertility

Fig. (2): Types of infertility

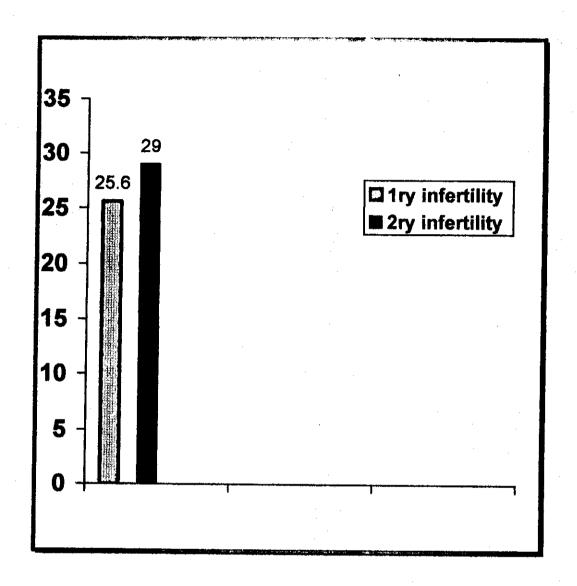


Fig. (3): Mean age distribution for types of infertility

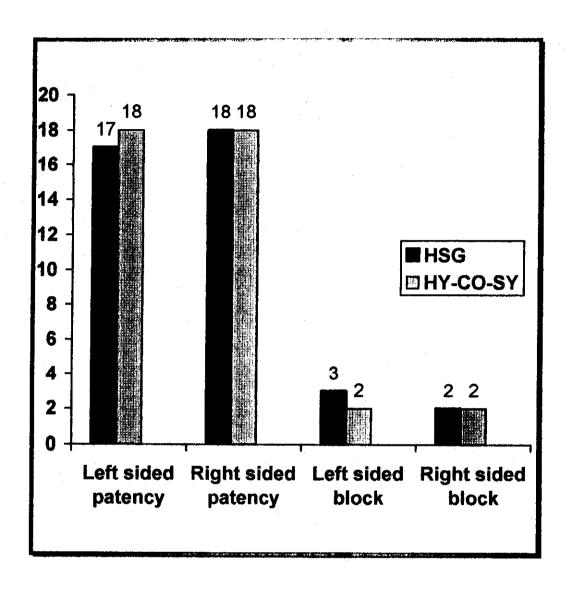


Fig. (4): Comparison of HY-CO-SY with HSG in term of tubal patency.

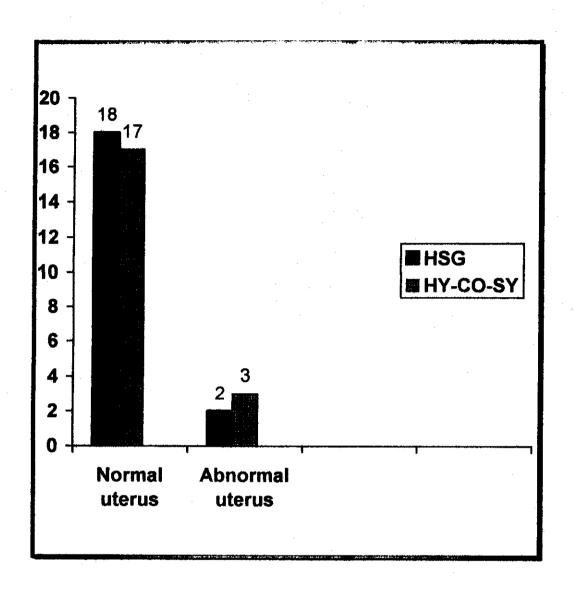


Fig. (5): Comparison of HY-CO-SY with HSG in term of uterine abnormalities.



Fig (6): hysterosalpingogram shows average sized uterus with normal shape, patent both fallopian tubes with good peritoneal spill.



Fig (7): Longitudinal ultrasonographic scanning of the same patient {P. 65} before Echovist-200 injection shows the catheter inside the uterine cavity.

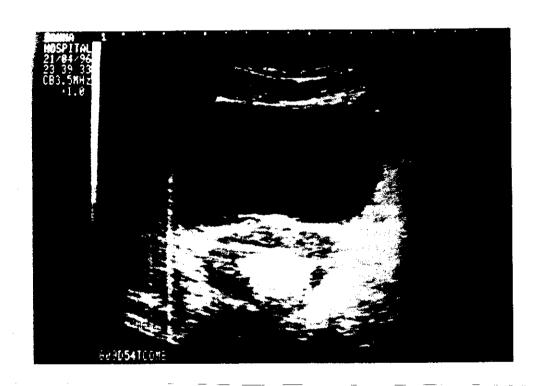


Fig (8): hysterosalpingo-contrast-sonography of the same patient {P. 65}shows normal filling of the uterus, patent both fallopian tubes with good peritoneal spill.

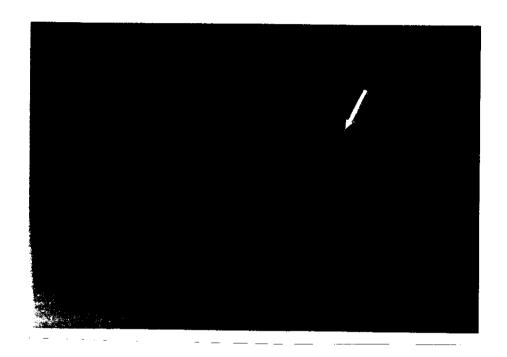


Fig (9): HSG shows good uterine cavity filling, good filling of the right tube down towards its lateral end, and filling defect in the left tube.

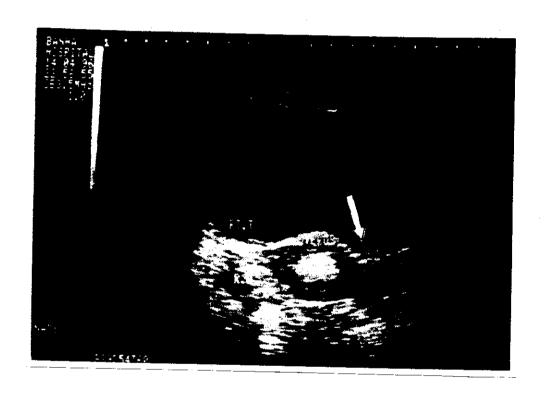


Fig (10): HY-CO-SY of the same patient {P. 68} shows filling of the uterine cavity and right tube with peritoneal spill and filling defect in the left tube.

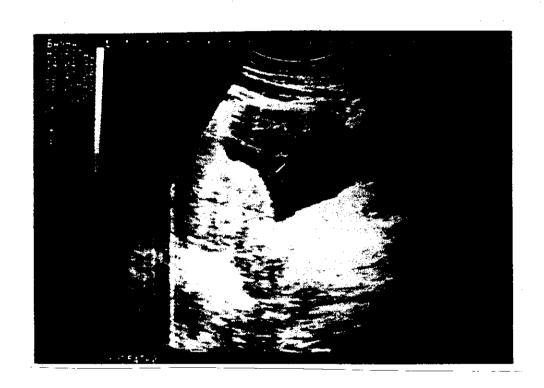


Fig (11): Longitudinal scanning of hysterosalpingo-contrastsonography of the same patient {P. 68}

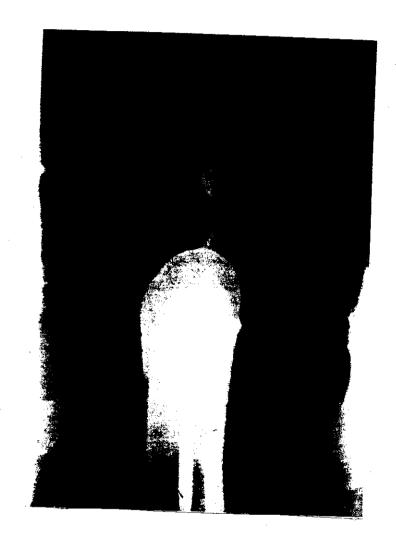


Fig (12): HSG shows normal filling uterus with good filling of both tubes till their ends.

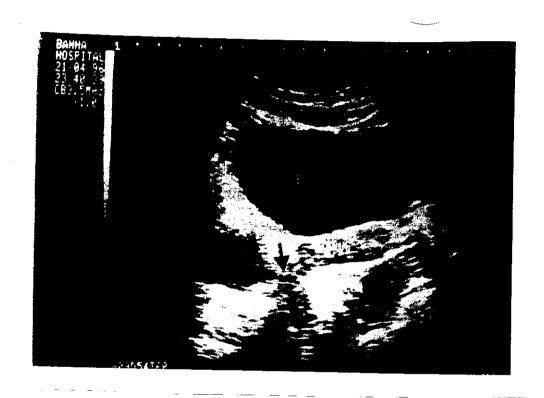


Fig (13): HY-CO-SY of the same patient {P. 71} shows normal filling uterus, the left tube shows good filling and spill while the right tube shows uterotubal spasm.



Fig (14): HSG shows small sized uterus with good filling, both tubes are visualized till lateral ends.

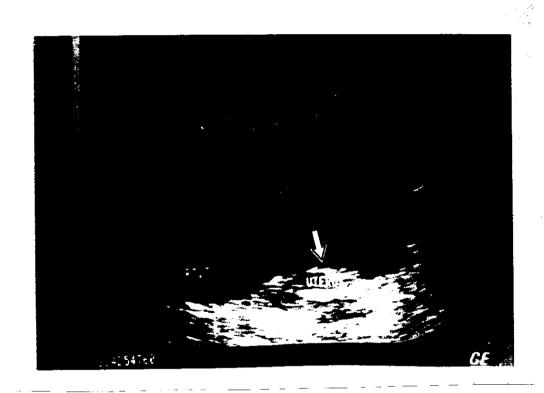


Fig (15): HY-CO-SY of the same patient {P. 73} shows small sized uterus with both patent tubes and peritoneal spill.

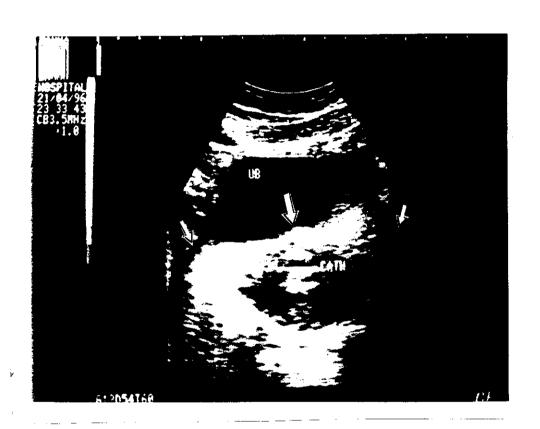


Fig (17): HY-CO-SY of the same patient {P. 75} shows incomplete filling of the uterine cavity with filling defect of both tubes.