

Hysterosalpingo Contrast Sonography (HyCoSy)

The purpose of this leaflet is to provide you with information about the HyCoSy test.

What is the HyCoSy test?

The HyCoSy is a special ultrasound test to show if your fallopian tubes are open (not blocked). Firstly, the womb is assessed in two dimensions to allow us to perform an assessment of the womb's structure. The test consists of the injection of a contrast medium (dye) through the cervical canal into the womb, through the fallopian tubes and then into the abdominal cavity. The movement of the contrast medium can be watched during a vaginal (internal) scan. This technique allows for any blockage to be identified, which may be present in the fallopian tubes.

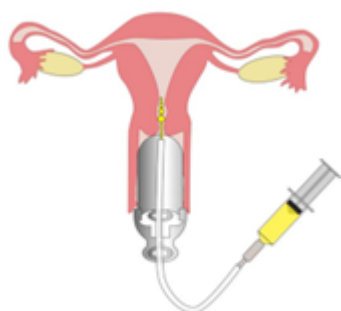


Figure A: Injection of contrast medium through cervical canal and into womb.

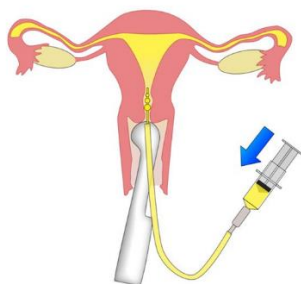


Figure B: Use of vaginal (internal) ultrasound scan to watch passage of contrast medium.

When can I have the HyCoSy?

The HyCoSy is usually carried out between day 6 and day 12 of your menstrual cycle. The first day of any blood loss is labelled as day 1 of your cycle. **Once your appointment is confirmed, it is important that you avoid pregnancy by using a reliable contraception method, such as condoms or abstaining from intercourse from day 1 of your menstrual cycle and up until the day of the HyCoSy procedure.**

If you are taking any fertility drugs (e.g. Clomid), these should be stopped at the start of the month on which you are having the HyCoSy.

It is very important that we do not do the test if there is the slightest chance that you might be pregnant. **You should do a urine pregnancy test one day before the procedure. A urine pregnancy test will also be performed before the procedure on the same day.**

- **If you have regular periods**, please call us on day 1 of your cycle on 01438 286178. Please leave a voicemail with your name, contact number and the reason for your call (booking a HyCoSy) if there is no response.
- **If you have irregular periods**, please contact your GP who will issue you with medication to trigger a bleed (withdrawal bleed). Please call us on day 1 of your bleed on the number above.
- If the first day of your period falls on a weekend, then please call us and leave a voicemail.
- If there is a shortage of appointments, we may ask that you telephone back when you have your next period.
- The HyCoSy will have to be rearranged if you are on your period or are still bleeding on the day of your test.

How is the HyCoSy performed?

The examination takes approximately 30 minutes, and no anaesthetic is usually required. A catheter (a flexible tube) is passed into the vagina through the cervix (neck of the womb) and into the uterus (womb). A small balloon is then inflated to keep the catheter in place. The contrast medium is then injected into the uterus through the catheter. The injection of the contrast medium may cause some discomfort similar to the cramps experienced during menstruation (period pain). A vaginal ultrasound scan (internal scan) is undertaken at the same time allowing your doctor to view the contrast medium/saline flowing through the fallopian tubes to assess for blockage.

Is this test painful?

Cramping pain similar to 'period pain' is common but only lasts for a matter of minutes. Very occasionally a more severe pain is experienced. Occasionally, this pain can be felt in your shoulder tips but although this can be uncomfortable, it is no cause for concern.

We advise that you take pain relief 60 minutes prior to the procedure. Doctors recommend ibuprofen (Brufen) 400 mg and paracetamol 1 gram (these can be taken together). If you are allergic to either of these, other options can be discussed with your doctor. Some women feel faint or nauseated after the procedure. This is uncommon but it is sensible to allow yourself half an hour to recover before leaving the clinic or bring an escort with you.

When do I find out the result of my HyCoSy?

After the ultrasound scan has been completed, the doctor will discuss the results with you. The ultrasound will only show where the contrast medium has flowed (or spilled). If any abnormality is suspected, further investigations (such as laparoscopy and/or hysteroscopy) may be recommended to investigate the situation further.

What does HyCoSy not tell us?

HyCoSy cannot tell us whether you have adhesions (scar tissue) outside your fallopian tubes/uterus or have endometriosis. This can only be diagnosed by laparoscopy. If the contrast medium is not seen to pass through one or both of your tubes, this may indicate a blockage.

Will I need other medication?

Your consultant will suggest that you have a high vaginal swab and chlamydia screen performed to exclude infection prior to the HyCoSy test. You will be required to take antibiotics to reduce the chance of infection after your test. These will be prescribed for you on the day of the procedure.

Are there any side effects of the procedure?

For most patients, HyCoSy can be performed quickly and easily and gives important information about blockages in the fallopian tubes. The procedure is considered safe, well-tolerated and rarely causes complications. Slight vaginal blood loss post HyCoSy is common. Very rarely pelvic inflammation can be caused or can reoccur after a HyCoSy. Symptoms to look out for include abdominal and/or pelvic pain, vaginal discharge and fever, which occurs a couple of days after the procedure. Antibiotic therapy is necessary in these cases. Very rarely an allergic reaction may be experienced when the contrast medium is injected.

Other possible side effects include:

- Pelvic pain due to swelling of the womb and fallopian tubes caused by filling with the contrast agent, particularly pronounced in the presence of blocked tubes.
- Vasovagal reaction (outbreaks of sweating, dizziness, nausea and vomiting) during the procedure.
- Pelvic infection, which may require antibiotics (0-3 in 100 women).
- Perforation of the womb (less than one in 1000 women).
- Allergic reaction to the dye (less than one in 100 women).
- Inability to complete procedure - this can be due to discomfort during the procedure or technical difficulties. For example, in women with cervical narrowing, it may be difficult to insert the catheter into the cervical canal so that dye can be injected. Incomplete distension (expansion) of the uterine cavity with the contrast may also prevent good quality ultrasound images from being obtained. This can occur in women with uterine adhesions (scarring) or large benign tumours called fibroids, which may partially block the inside of the uterus. In 5 out of every 100 HyCoSy procedures, the pictures produced are unclear and if this is the case, you may need further tests.

It is important to remember that no tubal check test is 100% accurate at showing patent (open/unblocked) fallopian tubes; HyCoSy will wrongly suggest that the tubes are blocked in 5 out of every 100 women with patent tubes.

- **This procedure can result in miscarriage if you are pregnant.** Therefore, it is scheduled between days 6 and 12 of your menstrual cycle, and contraception must be used from day 1 of this cycle. If these conditions are not met, the procedure will be cancelled that day and rescheduled for the next cycle if you are not pregnant. We understand this may be frustrating, but your safety is our top priority.

Are there any factors that prevent you from having a HyCoSy?

HyCoSy should **NOT** be performed if you:

- are allergic or have ever had an allergic-like reaction to contrast medium.
- think you may be or are pregnant.
- currently have a pelvic infection.
- have any vaginal bleeding.

Are there any alternative tests?

- Hysterosalpingography (HSG) is an alternative to HyCoSy, but uses X-rays to assess your fallopian tubes and uterus rather than ultrasound. The downside of an HSG is that X-rays expose you to radiation.
- Laparoscopy and dye test is another alternative, but this is a surgical operation that requires a general anaesthetic. This test tends to be reserved for patients who are not suitable for HyCoSy/HSG or who have had inconclusive results from one of these tests.

Important: If you have any problems after the test including persistent pain for longer than 2 hours, you should contact the clinic for advice (see Fertility Team contact details below). If you develop an offensive vaginal discharge in the days after the procedure, please also contact us for advice.

Further information

- **British Fertility Society** www.britishfertilitysociety.org.uk
Telephone 02037 255849
- **Fertility Network UK** <https://fertilitynetworkuk.org>
Telephone Support Line 01213 235025

Useful contact details

East and North Hertfordshire NHS Trust:

- Website www.enherts-tr.nhs.uk
- Telephone 01438 314333

Fertility Team:

- Telephone: 07584 509341
- Email - fertility.enh-tr@nhs.net

Leaflet information

**You can request this information in a different format or another language;
please speak to your doctor or nurse.**

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