



## The Women's Natural Health Practice Saline Infusion Sonography (SIS) Fact Sheet

### History

Sonohysterography is a new technique developed to better image the uterine cavity. It uses an infusion of sterile saline through a soft plastic catheter placed in the cervix in conjunction with transvaginal ultrasound. The saline infusion distends the uterine cavity and provides an excellent contrast to the lining, giving improved visualisation of uterine and endometrial pathology.

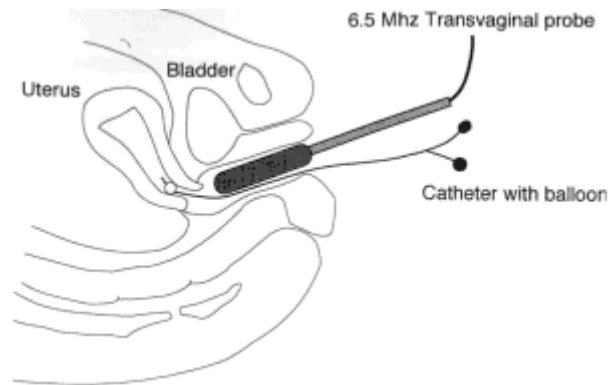


Diagram of Sonohysterography

### Why is it performed?

The main indications for this procedure include:

- Abnormal uterine bleeding both pre and post menopausal
- Investigation of infertility and recurrent miscarriage
- Endometrial assessment for patients before and after treatment
- Suggestion of a mass in the endometrial cavity on ultrasound



Sonohysterography - Before saline infusion

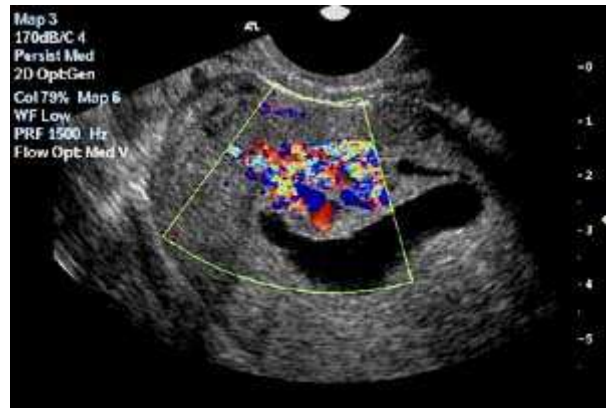


Sonohysterography - After saline infusion

This is a simple procedure, able to be performed in the office. It does not require sedation or analgesia. It allows the presence, nature, size, vascularity and site of attachment of a mass in the uterine cavity to be assessed. In a number of cases, it can eliminate the need for further investigation when no significant endometrial pathology can be demonstrated. This is particularly important in cases of bleeding around the time of menopause where a hormonal disturbance is the most common cause and does not benefit from surgery.

Patients undergoing investigation for infertility have a high incidence of polyps in the uterine cavity which may be responsible for their inability to conceive. This is particularly important in those patients starting on fertility treatment programmes, as these polyps may limit their success.

Patients on long term Tamoxifen therapy for breast cancer, have been shown to develop polyps and thickened uterine linings (endometrial hyperplasia) as well as occasionally developing endometrial cancer.



Colour doppler imaging of the endometrial polyp during Sonohysterography

More commonly, however there changes in the muscular layer just under the uterine lining which is distinguishable from endometrial hyperplasia on sonohysterography but not on standard transvaginal ultrasound.



## Preparation for SIS

Before a SIS is carried out vaginal swabs need to be taken to rule out any infection. These can be taken at the initial consultation visit or on a short appointment one week before your SIS visit. The cost of these swabs is included in the SIS price. SIS needs to be carried out between the last day of a menstrual period and day 10 of a natural unprotected menstrual cycle (with the first day of the menstrual period counting as day 1) or on any non bleeding day of the cycle if reliable contraception is being used.

## Is there any discomfort?

There can be mild discomfort associated with this procedure. Taking an analgesic such as Neurofen (two tablets) half an hour before the procedure is recommended. Some patients also experience period like cramping pains after the procedure for a few hours.

## Summary

SIS is a low risk procedure that is of comparable accuracy to Hysteroscopy, indicating which direction further diagnosis and treatment of the patient's condition should take. This technique, along with transvaginal ultrasound, is an ideal non –invasive screening test for intra-uterine abnormalities. Please note that this procedure is offered only at our Richmond Practice. The price including all consumables is £245.00, plus pre-procedure swabs at £43.00.

Trevor A. Wing © 2004, version 2, 11-2009