



OFFICE HYSTEROSCOPY – POLYPECTOMY: QUICK AND SAFE SOLUTION

AIM

AIM OF THE STUDY WAS TO COLLECT AND ANALYZE THE DATA OF ENDOMETRIAL POLYPECTOMY DURING OFFICE HYSTEROSCOPY. PATIENTS WITH DIFFERENT INDICATIONS AND COMPLAINS REFERRED TO OUR CLINIC, FOR THIS AMBULATORY PROCEDURE.

METHOD

IN THIS RETROSPECTIVE STUDY WE COLLECTED CLINICAL DATA OF 64 WOMEN WHO UNDERWENT OFFICE HYSTEROSCOPY AND POLYPECTOMY BETWEEN 01.01.2017. AND 02.02.2021. IN OUR OUT-PATIENT CLINIC IN DEBRECEN, HUNGARY. FOR THE PROCEDURE HYSTEROSCOPE (EMD HUNGARY) WAS USED, WITH A BUILT-IN WORKING CHANNEL. OUTER DIAMETER OF THE INSTRUMENT WAS 5.5 MM. SCISSORS AND GRASPER WERE USED FOR THE MECHANICAL POLYPECTOMY WITHOUT ANY KIND OF ANESTHESIA IN AN OUT-PATIENT SETTING. PROTOCOL NO.: DE RKEB/IKEB:5647-2021

RESULTS

THE PATIENTS' MEAN AGE WAS 39.7 YEARS. THE INDICATION FOR THE PROCEDURE WAS POSITIVE ULTRASOUND FINDING IN 27 CASES (42,18%), INFERTILITY IN 24 CASES (35,82%), RECURRENT ABORTION IN 2 CASES (2,98%) AND ABNORMAL UTERINE BLEEDING IN 11 CASES (16,41%) KÖRDIAGRAMM. IN 49 CASES (73,13%) REMOVAL OF POLYP WAS PERFORMED. RESULT OF THE HISTOPATHOLOGICAL EXAMINATION WAS ENDOMETRIAL POLYP IN 35 CASES (71,42%), NORMAL ENDOMETRIUM IN 7 CASES (14,28%).

CONCLUSION

SUCCESSFUL RESECTION CAN BE PERFORMED WITH OFFICE HYSTEROSCOPY IN MOST ENDOMETRIAL POLYPS' CASES WITHOUT CAUSING SEVERE PAIN, AND WITH NO NEED FOR GENERAL ANAESTHESIA. THIS TECHNIQUE PROVIDES A COST-EFFECTIVE AND FEASIBLE SOLUTION FOR MANY CASES OF PATIENTS WITH INFERTILITY OR MENSTRUAL DISORDERS CAUSED BY ENDOMETRIAL POLYPS.

