Metroplasty for Septate Uterus Improves Reproductive Outcomes

By Jamie Habib [2]

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In patients with an American Fertility Society (AFS) class V or class VI septate uterus, hysteroscopic metroplasty is associated with a significant improvement in reproductive performance, concluded the authors of an observational retrospective study conducted in France.¹

Currently, metroplasty is the method of choice for the surgical correction of septate uterus, the most common congenital uterine anomaly.¹,² It previously has been determined that compared with the open, abdominal metroplasty performed before the advent of minimally invasive surgical techniques, hysteroscopic metroplasty is a simple, safe, and relatively quick procedure—ranging from 20 to 60 minutes—for achieving normal uterine architecture in women with septate uterus.²,³ Approximately 40% of women with a septate uterus experience reproductive problems that manifest most commonly as infertility, obstetrical complications, and recurrent miscarriages.⁴

Although metroplasty has empirical clinical value, the procedure and its indications are a matter of debate because there is a lack of randomized trials providing definitive evidence on the efficacy of the procedure. For example, some patients with a septate uterus have had successful pregnancies without any treatment interventions.

To assess the reproductive outcomes after surgical correction of a class V or VI septate uterus, the study authors evaluated data from 128 patients with a septate uterus who have either primary infertility or recurrent miscarriages. Of the 128 participants, 78 women (60.9%) became pregnant and 70 live births were recorded after hysteroscopic metroplasty.

Among the women who had primary infertility, 25 pregnancies occurred. Slightly more than half (13) of these pregnancies were the result of assisted reproductive technology. The rate of first live births in women with infertility was 53.1%. Among the women who experienced recurrent miscarriage, hysteroscopic metroplasty resulted in a significantly improved miscarriage rate. However, the outcomes after surgery were largely dependent on the anatomical type of septum.

Based on these findings, the study authors concluded that hysteroscopic metroplasty is accompanied by a safe improvement in reproductive performance in patients with a partial, complete, or fundic septate uterus.¹ Additional potential benefits of metroplasty that have been reported previously include the prevention of breech delivery and a reduction in the rate of cesarean deliveries.⁵

Pertinent Points:
- The surgical correction of a septate uterus via hysteroscopic metroplasty can improve significantly miscarriage rates among women with a history of recurrent miscarriages before the procedure.
- Hysteroscopic metroplasty seems to improve pregnancy rates among women with primary infertility.

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