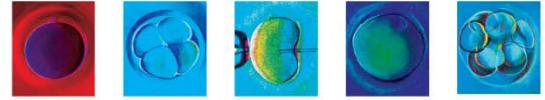


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# FERTILITY FACT SHEET

San Ramon / Orinda / San Jose

## The Impact of Hydrosalpinx on Pregnancy Rates in IVF Cycles and Treatment Options

Many patients who utilize In Vitro Fertilization techniques to try to achieve a pregnancy do so because of abnormal fallopian tubes. In some situations the tubes are not functioning well, possibly because the inside of the tube does not have good cilia (hair-like structures that move the egg down the tube), or due to scar tissue surrounding the tubes. Sometimes the tubes are actually blocked. This may result from a past infection that has damaged the tube, or may be due to scarring from previous operations or endometriosis. When a fallopian tube is blocked at the end of the tube it may accumulate fluid inside of it, and this is called a hydrosalpinx.

Multiple studies in the past few years have found that women with an intact hydrosalpinx have up to a 50% lower chance for a successful pregnancy when undergoing IVF than women with normal fallopian tubes. The reason patients with a hydrosalpinx have lower pregnancy rates with IVF appears to be that the fluid which accumulates in the hydrosalpinx drains back into the uterus and diminishes the chance for an embryo to implant. The fluid from a hydrosalpinx can be toxic to the embryo, or may just mechanically decrease the chance for implantation.

A number of medical studies have now demonstrated that if a hydrosalpinx is either surgically removed or blocked before an IVF cycle, a woman can then expect a similar pregnancy rates to women who have normal fallopian tubes. Options available include total removal of the fallopian tube (salpingectomy) or blocking the fallopian tube at the junction of the fallopian tube to the uterus. Removing a hydrosalpinx or blocking the tube at the uterine junction can be performed by Laparoscopy. A newer option for blocking the fallopian tube is the placement of an Essure device. The Essure device is placed at Hysteroscopy and permanently blocks the tube at its junction to the uterus, thus preventing any fluid from the hydrosalpinx entering the uterus.