

Information for parents

Selective Salpingogram (SS)



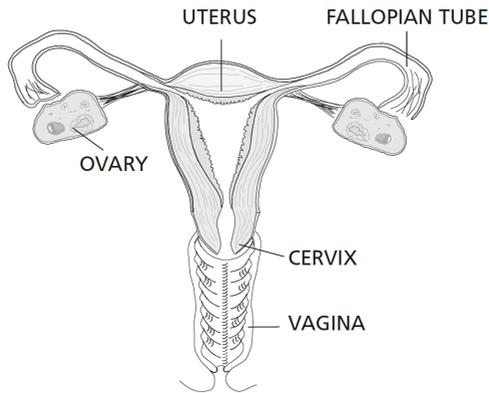
By your side

What is a Selective Salpingogram?

A Selective Salpingogram is a special X-ray procedure used to see if you have blocked fallopian tubes, (the tubes that connect your ovaries to your uterus) and can then attempt to unblock them.

Why do I need one?

You have been referred for a Selective Salpingogram as your doctor has evidence that your tubes are blocked. This may be why you have not been able to get pregnant. This procedure may be able to unblock your tubes which could improve your fertility.



How do I arrange my appointment?

On the first day of your period please ring the Radiology Department on 0121 333 9999 ext 5309. We need to perform the procedure as soon as possible after your period has finished.

It is very important that we do not perform the procedure if there is the slightest chance that you could be pregnant. The procedure as well as X-rays used can put your pregnancy at risk.

For this reason, please DO NOT have sexual intercourse from the first day of your period until after the procedure.

What will happen when I arrive at the hospital?

When you arrive in the Radiology Department you will be booked in by the receptionist. You will be asked to empty your bladder, to undress and put on a gown in the changing area. You will then be shown through to the X-ray room.

The Doctor will ask you some questions about:

- whether you have any allergies
- whether you have taken pain relief
- whether you have followed the advice to avoid sexual intercourse.

The procedure will be explained and you will be asked to sign a consent form.

What does the procedure involve?

You may be given a local anaesthetic gel into the cervix for this procedure.

You will be asked to lie-down on the X-ray table in a similar position to when you have a smear test. A speculum (the same instrument as used for a smear test) will be placed in your vagina. A special curved catheter is gently passed through the cervix (the opening in your uterus) and up into the opening of the fallopian tubes in turn. X-ray contrast is passed through the catheter and into your fallopian tubes. As this happens, X-rays images will be taken.

If there are any blockages in your fallopian tube these will show up on the X-ray monitor. A smaller soft wire will be passed up the inside of the curved catheter and along the

fallopian tube to try and open any blockages. If necessary this will be repeated for the other fallopian tube. You may be able to see the X-ray pictures on a TV monitor after the procedure. The procedure should take between 25-30 minutes.

What happens after the procedure?

After the procedure you will be given a sanitary pad. It is normal to have some bleeding for a few hours to a couple of days after the procedure. You will be given a prescription for a single dose of an antibiotic after the procedure to prevent an infection from developing. We will ask you to rest in a recovery area for a short time until you feel well enough to leave.

You will get the results of the procedure when you next see your hospital consultant. If you do not already have an appointment, please make one.

Appointments can be made at the hospital reception or by calling 0121 333 9999 ext 5451.

Will it hurt?

You may feel some 'period type' pain as the curved catheter is passed through your uterus and into your tubes. This discomfort may also be felt as the contrast fills your tubes or as the soft wire is used to unblock your tubes. This pain settles soon after the procedure is finished.

As you may feel some discomfort we advise that you take some simple painkillers (the ones you usually take for period pains eg paracetamol or neurofen) 2 hours before your appointment.

Please let the radiographer know if you have taken any painkillers.

If your pain continues after the procedure we can give you some more pain relief.

Most pain is short lived. If you are still experiencing pain, bleeding or any other problems twenty four hours later then contact your GP.

What are the risks?

Pregnancy

The X-rays and the catheter and soft wire used in this procedure can damage a baby during early development and the procedure can cause miscarriage. This is why it is important that you follow guidance about avoiding sexual intercourse before the procedure.

As blocked tubes may have been the cause of your infertility, if you become pregnant following the procedure you have a higher risk of having an ectopic pregnancy (where the egg implants outside of your uterus). This risk is between 3 to 9% of all pregnancies.

Pain

You may feel some 'period type' pain during the procedure. This is discussed in the previous section.

Tubal perforation

As the small soft wire is passed along the fallopian tubes there is a small chance it may make a hole in them. This usually causes more severe pain. If this happens the wire will be removed and we will give you painkillers.

There is an increased risk of infection as a result. To protect you against this you will be given antibiotics if tubal perforation occurs. Tubal perforation is rare occurring in 2-5% of patients and is seen usually when the tubes have been inflamed previously.

Infection

There is a small risk of infection of 4% (higher if tubal perforation occurs). You will be given a prescription for a dose of antibiotics to prevent this from happening

Allergy

It is extremely rare but it is possible to have an allergic reaction to the X-ray contrast. It is important that you let the Doctor know if you have any known allergies.

Fainting

Occasionally, a patient feels 'faint' following the procedure. This is why we ask you to spend a short time resting in the recovery area. It is rare to actually faint.

Failure of procedure

It may not be possible for us to unblock your tubes.

What are the benefits?

Unblocking your fallopian tubes can improve your chance of getting pregnant. If the tubes are unblocked successfully then up to 20% of patients become pregnant.

What are the alternatives?

Hysteroscopic cannulation

This is similar to a Selective Salpingogram but a hysteroscope (a small microscope) is used instead of X-rays. The National Institute of Clinical Excellence (NICE) suggest that a Selective Salpingogram is as effective as Hysteroscopic cannulation. We have chosen to offer Selective Salpingograms.

Tubal surgery

This is a more invasive procedure. It may be used in very specific situations. This will be discussed with you if appropriate.

Should I bring someone with me?

Yes. It is helpful for someone to drive you home after the procedure.

When can I start trying to conceive again?

We advise that you wait until after your next period before trying to conceive. There is a small risk that if you conceive before this time the X-rays may have damaged your released egg.

Summary

A Selective Salpingogram is a safe and effective way of attempting to unblock your fallopian tubes. However, complications can happen. You need to know about the complications to make an informed decision. If you have any questions, you should make sure you ask them.

Where can I find out more information?

If you have any further questions about your procedure you can contact the Radiology Department on 0121 333 9999 ext 5309

You may also find the following website useful. NICE fertility guidelines (CG11) available at: www.nice.org.uk

This leaflet is intended for information purposes only. It should be used together with advice given by your healthcare professional.

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