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# EVALUATION OF TRANSVAGINAL ULTRASONOGRAPHY FOR THE DIAGNOSIS OF ENDOMETRIAL PATHOLOGY

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#### PROBLEM STATEMENT

Hysteroscopy is considered the "gold standard" procedure in assessing endometrial pathology, however it is more expensive and invasive method than ultrasonography. The objective is to evaluate the effectiveness of transvaginal ultrasonography for the diagnosis of endometrial pathology.

#### **METHODS**

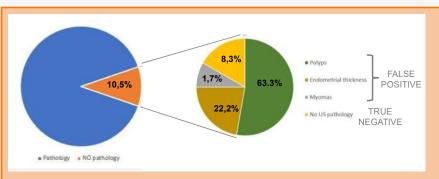
We present a retrospective cohort study including women sonographically diagnosed of endometrial pathology, abnormal uterine bleeding or fertility disorders, who underwent office hysteroscopy without anaesthesia by the Office Hysteroscopy Unit of Hospital del Mar from September 2017 to June 2018.

Sensibility, specificity, positive predictive value (PPV) and negative predictive value (NPV) of ultrasonography for the diagnosis of endometrial pathology were determined using hysteroscopy as the "gold standard".

### **RESULTS**

There were 341 patients included, all patients subjected to hysteroscopy had suspected endometrial pathology and the definitive number of patients without pathology evidenced by hysteroscopy was 36 (10.5%).

Hysteroscopy confirmed the ultrasound findings (true 298 (190 polypectomies, myomectomies, 11 septum resection, 7 IUD removing, 5 cases of retained products of conception and 41 suspicious endometrial pattern). In 30 (8.8%) cases transvaginal ultrasonography showed pathology that was dismissed by hysteroscopy (false positive), from these, 7 (23.3%) were postmenopausal women and 23 (76.6%) were at reproductive age and 14 (38.8%) were nulliparous. From the false positive cases 19 (63.3%) were suspected polyps, 8 (22.2%) endometrial thickness and 3 (8.3%) suspected myomas. Only 6 (1.7%) negative cases by ultrasound were confirmed by hysteroscopy (true negative).



**FIG. 1:** Percentatge of patients without pathological fidings from the total of histeroscopies performed. Distribution of suspected pathology in the group of patients without pathological findings by hysteroscopy.

Ultrasonography	
Sensitivity	97 %
Specificity	16.6 %
PPV	91 %
NPV	46 %

**FIG. 2:** Diagnosis índices of ultrasonography using hysteroscopy as the "gold standard".

#### CONCLUSIONS

- Ultrasonography imaging is a method with a high sensibility for the evaluation of endometrial pathology, especially among postmenopausal women. The low specificity obtained in this study could be explained because of the low number of patients without pathology and the lack of a control group.
- A limitation of ultrasonography is that it does not allow biopsy for confirmatory histological diagnosis.

