



PATIENT FACT SHEET

Hydrosalpinx

The fallopian tubes are attached to the uterus (womb). Normally, the fallopian tube picks up an egg each month as it is released (or ovulated) from the ovary. Sperm can travel from the vagina through the uterus and will eventually meet the egg in one of the two tubes. Fertilization is when the egg and sperm join together to form an embryo (fertilized egg). The embryo travels through the tube into the uterus. When it reaches the uterus, it can implant into the uterine wall and develop into a baby. However, an old infection can cause the tubes to fill with fluid and enlarge (dilate). When this happens, the tube is called a hydrosalpinx. A normal pregnancy in the uterus cannot occur because the tube may be severely damaged and blocked. A blockage will not allow the egg and sperm to meet.

What causes a hydrosalpinx?

Hydrosalpinx is commonly caused by an old infection in the fallopian tubes. These infections may be caused by a sexually transmitted disease. Other causes include previous surgery (particularly surgeries on the tube) or severe adhesions of your pelvis.

What are the symptoms of hydrosalpinx?

Some women with hydrosalpinx may have constant or frequent pain in their lower belly or abdomen. A vaginal discharge can also be associated with this condition. Other women may not have any symptoms.

How will my doctor diagnose hydrosalpinx?

There are three ways that your doctor can check if you have hydrosalpinx:

X-ray procedure: The doctor will inject a special liquid into your uterus and then take an x-ray (called a hysterosalpingogram or HSG) to see where the liquid goes. If your fallopian tubes are open, the liquid will flow out of the ends of the tube. If the tubes are blocked, the liquid will be trapped and your doctor will be able to tell that you have a hydrosalpinx. However, this test may falsely suggest that the tubes are blocked in the area the tubes insert into the uterus ("false positive"). This false positive finding can occur in 15% of women.

Surgery: Your doctor will make a small opening in your belly and insert a special telescope or laparoscope. During this surgery, the doctor can look at your fallopian tubes to see if they are blocked. Usually the doctor inserts a dye through the vagina into the uterus and fallopian tubes to confirm that the dye passes through the ends of the tubes.

Ultrasound: Your doctor may do an ultrasound to look at your fallopian tubes.

If I have hydrosalpinx, can I have a baby?

If your fallopian tubes are completely blocked, an egg cannot travel through them to your womb. You will need to be treated by a doctor before you can get pregnant. Your doctor may be able to open the tubes with surgery.

If there is too much damage to the tubes, an egg might not be able to travel through them even if they are opened. You will need treatments that do not involve the tubes to help you get pregnant. One of these treatments is called vitro fertilization (IVF). In this procedure, your egg and the man's sperm are joined (fertilized) in the laboratory. Then the doctor places the fertilized eggs (embryos) into your womb.

For unknown reasons, IVF may not work if you have hydrosalpinx. Your doctor may recommend that your fallopian tube is removed or separated from the womb before you start IVF treatment.