

Effect of introduction of Hy-Co-Sy services on waiting times for tubal patency tests

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Background

The suspension of non emergency services such as fertility management while we grappled with the Covid pandemic had significant damaging emotional impact across the world.

Most NHS patients who had experienced delays in starting fertility treatment due to COVID-19 had also experienced delays in accessing further tests or surgeries and/or NHS waiting lists (66%, N=201)¹

These experiences match with findings from the Royal College of Obstetricians and Gynaecologists report which found that gynaecology waiting lists have faced the biggest increase as a result of the pandemic of all medical specialities.²

Hysterosalpingo- contrast- sonography (Hy-Co-Sy) services were recently introduced at University hospital Lewisham to address the increased backlog of patients with subfertility awaiting tubal patency tests as a result of elective surgeries being put on hold and several departments being overwhelmed during pandemic period. It was anticipated that this would reduce waiting times as well as the need for an ultrasound for pelvic evaluation.

Objective

to determine whether waiting time for women with subfertility referred for tubal patency tests was reduced after introduction of Hy-Co-Sy services at a district general hospital.

Design

Observational cohort study.

Method

Waiting times for all patients at University Hospital Lewisham that had tubal patency tests were calculated for a period for a period of six months since the introduction of Hy-Co-Sy services in December 2021.

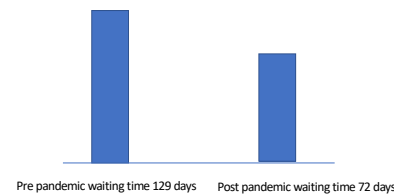
These were compared to waiting times during similar timeframe during 2018-2019 ; which would represent pre-pandemic era.

During the pandemic, most elective activities including fertility related procedures were put on hold, therefore waiting times during these periods were not calculated.

Results

Average waiting time for women who have tubal patency tests has reduced after introduction of Hy-Co-Sy services from 129 days to 72 days

Extra theatre lists for day care laparoscopy will also have contributed to this.



Conclusion

Hy-Co-Sy can help avoid invasive surgery as well as exposure to ionising radiation for women who need tubal patency test for evaluation of subfertility.

The need-based initiation of Hy-Co-Sy clinics at our institute which is a district general hospital can be replicated in similar settings.

Besides improving patient services; this could reduce number of appointments and cost incurred, minimise the workload of radiology, and could be run by the gynaecology department as a one stop clinic where further plan for fertility management can be made on basis of test findings. Women have experienced unprecedented delays in seeking fertility treatment during the pandemic and this could be one of the ways to restore services.

We plan to continue collecting data for waiting times and study the impact of different measures on them individually. Waiting times are expected to improve further as backlog reduces.

TRIVIA

The first investigation for tubal patency was HSG – done by Rindfleisch in 1910 by injecting bismuth in the uterine cavity

Nannini et al. were the first to introduce HyCoSy to assess tubal patency.

HyCoSy has been reported to be as reliable as the laparoscopy dye test or hysterosalpingography in the assessment of tubal patency and uterine abnormality

References

1. Impact of COVID-19 on fertility treatment 2020
UK statistics for IVF and DI treatment, storage and donation, published May 2022
2. Left too long: understanding the scale and impact of gynaecology waiting lists by Royal College of Obstetricians & Gynaecologists 2022