

AN AUDIT COMPARING ULTRASOUND REPORTING OF ENDOMETRIAL POLYPS WITH FINDINGS AT HYSTEROSCOPY WITHIN OUR LOCAL HOSPITAL

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Background

- Endometrial polyps are hyperplastic overgrowths of the endometrial glands and stroma
- They account for **nearly 30% of cases of abnormal uterine bleeding** and are **symptomatic in 56-88% of cases** (Godoy Borges et al., 2015)
- Transvaginal ultrasound is typically used to make the diagnosis; however, its sensitivity and specificity are not ideal, with reports indicating that **at least 30% of EP seen on ultrasound are not visible during hysteroscopy** (Pereira et al., 2021)

Rationale

- Accurate diagnosis of endometrial polyps is crucial for appropriate clinical management. Discrepancies in findings between TVUS, hysteroscopy, and histopathology could lead to under- or overtreatment, unnecessary procedures, or missed diagnoses. Evaluating the concordance of these diagnostic modalities in real-world practice will help optimize patient care pathways.

Aims

- To evaluate the diagnostic accuracy of transvaginal ultrasound (TVUS) and hysteroscopy for endometrial polyps by comparing findings with histopathology results, with a focus on differences between pre- and post-menopausal women.

Methodology

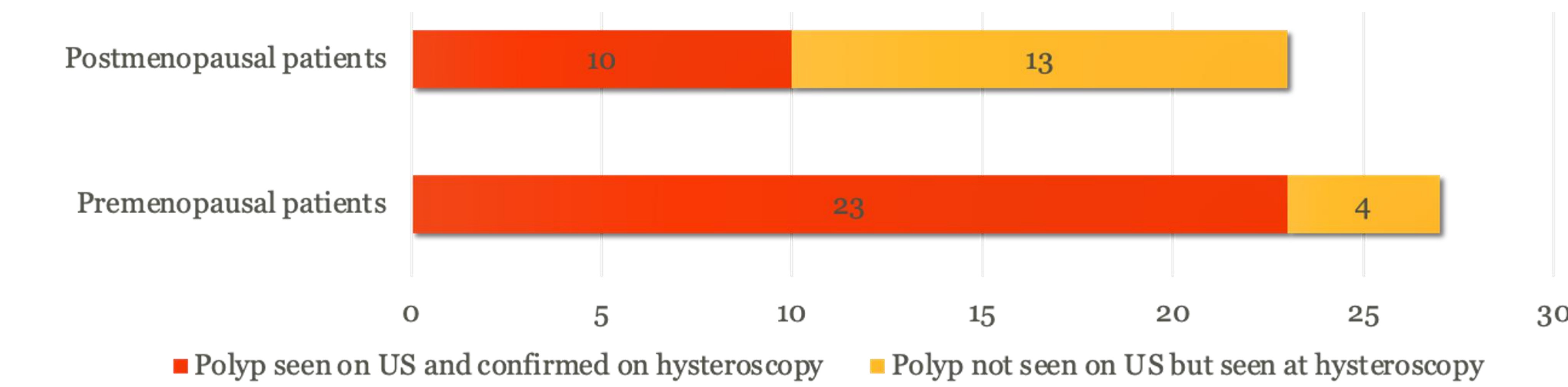
- A retrospective review of a random sample of patients who underwent diagnostic hysteroscopy for abnormal uterine bleeding, including those with suspected endometrial polyps or a thickened endometrial lining
- Data collected included age, menopausal status, symptomatology, ultrasound findings, hysteroscopic findings, histology results
- Analysis of data to check concordance between ultrasound and hysteroscopic findings

Results

- Total of 53 patients

Total – premenopausal patients 30	
Polyps detected on ultrasound	26
Polyps confirmed on hysteroscopy	23 (88%)
Polyps not seen on US but seen during hysteroscopy	4 (12%) 3 of them had US during the luteal phase

Total – postmenopausal patients 23	
Polyps detected on ultrasound	14
Polyps confirmed on hysteroscopy	10 (71%)
Polyps not seen on US but seen during hysteroscopy	13 (56%)



Discussion

- TVUS reliably detects polyps, particularly in premenopausal patients (23/26 confirmed on hysteroscopy).
- TVUS, especially done between days 3-5 of cycle, in pre-menopausal women, is valuable to reduce unnecessary interventions
- False negatives occur, as some polyps are missed (e.g., 13 cases in postmenopausal patients) but this is as high as there is a lower threshold for post-menopausal patients to undergo a hysteroscopy.
- In premenopausal patients, TVUS done on days 3–5 improves diagnostic accuracy
- Hysteroscopy complements TVUS by identifying polyps missed on ultrasound, ensuring better diagnostic precision.

Limitations

- Retrospective nature of the study and mall sample size (50 patients)
- Lack of departmental consensus - different clinical approach of abnormal uterine bleeding amongst different firms

Recommendations

- Ensure TVUS in premenopausal patients is performed during days 3–5 of the menstrual cycle to improve diagnostic accuracy by developing a streamlined care pathway
- Improve US training in detecting polyps to improve diagnostic accuracy
- Development of a departmental guideline on the management of abnormal uterine bleeding including management of polyps in pre- and post-menopausal patients

