

AMERICAN SOCIETY FOR REPRODUCTIVE MEDICINE

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PATIENT FACT SHEET Conceiving After Tubal Surgery

This fact sheet was developed in collaboration with The Society of Reprodutive Surgeons

The fallopian tube connects the ovary (where the egg is released) to the uterus (womb), where the fertilized egg develops into a fetus. Fertilization, the process in which the man's sperm joins the egg, takes place in the fallopian tube. If your fallopian tubes are the cause of why you cannot get pregnant, your doctor may discuss surgery as an option to fix your tubes.

What could damage my fallopian tubes?

Infections, abdominal surgery, and other diseases, such as endometriosis, can cause scars to form between the end of the tube and the ovary. The tubes also can become damaged with adhesions or scar tissue inside the tube or can become completely blocked.

The infections may be, but aren't always, sexually transmitted. Two common sexually transmitted infections are chlamydia and gonorrhea. Tuberculosis is very uncommon in North America, but it, too, can cause tubal disease. You can get a tubal infection after your appendix ruptures or bursts. Surgery or endometriosis (lining of the uterus deposited in the lower part of the belly) can also damage your fallopian tubes.

How can the damage be fixed?

The surgeon will try to cut the scars between your fallopian tube and ovary. If one or both tubes are completely blocked, your surgeon can attempt to open the tube.

Before you have surgery, your doctor will check your tubes by x-ray (hysterosalpingogram) or by ultrasound (sonohysterogram) for damage and decide what kind of surgery you need. The doctor injects a special liquid into your womb and looks at the x-ray or ultrasound to see if the liquid travels all the way through the tube. If the liquid does not travel completely through the tubes, there may be blockage.

Surgery can be done in one of two ways (laparoscopy or laparotomy). Laparoscopy, or minimally invasive surgery, can be performed. During this procedure a very small camera attached

to a thin telescope is inserted through a small incision (surgical opening) below your belly button. The surgery is performed using small tools, which can be inserted through other small incisions across your belly. A traditional open procedure, called a laparotomy, also may be used. In this procedure, the surgery is performed through a large incision made in your belly (abdomen).

Will I be able to get pregnant?

If your tubes are not badly damaged, surgery might help you get pregnant naturally. Your chance of getting pregnant after surgery is better if you are young and if the man has healthy sperm.

If your tubes are badly damaged, you might need infertility treatments to help you get pregnant. In vitro fertilization (IVF) is one treatment that is used. For IVF, your egg and the man's sperm are joined in the laboratory and then the doctor places the fertilized eggs into your womb. Your doctor will need to decide if surgery or other treatment, such as IVF, is better for you.

What are the risks of tubal surgery?

The biggest risk after tubal surgery is the possible development of a tubal (ectopic) pregnancy. A tubal pregnancy is a serious health problem that is more likely to happen after tubal surgery or tubal disease. The fertilized egg does not travel to the uterus. Instead, it stays in the fallopian tube and begins to grow there. The tube is too small to hold a baby, and the tube will burst if the pregnancy continues. The mother may have internal bleeding or rarely could even die. Therefore, if you have had tubal surgery or tubal disease, you should tell your doctor as soon as you think you are pregnant or have missed your period. Irregular vaginal bleeding and lower abdominal pain are common symptoms associated with tubal pregnancy.

Other risks include the possibility of bleeding, damage to other organs, or a reaction to the anesthesia.

If you have	Your chance of getting pregnant after surgery is
Very few adhesions between your tubes and ovaries	Much better
Lots of thick adhesions between your tubes and ovaries	Not good, so you might need IVF
A blocked tube that is otherwise healthy	About 20% to 30%
A blocked tube that is filled with fluid (called hydrosalpinx)	Not very good. IVF may work, but the tubes will need to be removed or surgically blocked to increase your chances of success

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