Introduction

- Surgical evacuation of uterus is a blind procedure therefore retained products of conception (RPOC) is a frequent complication.
- Clinical judgement of completeness of evacuation is subjective and arbitrary.
- Overzealous curettage causes Asherman syndrome.

Objective

- To screen women by TVS for RPOC after suction evacuation of missed abortion before leaving OR.
- This is different from US guided procedure which uses TAS that requires an assistant and full bladder.

Sonographic appearance

- RPOC appear as irregular echogenic, isoechoic, or heterogenous clumps.
- Hypoechoic content is usually insignificant and represents blood.
- The blood inside the cavity immediately after the procedure may enhance visualization in sonohysterography like fashion.

N.B: No pictures because no printer was available in OR.

During D&C the uterus is considered empty when:

- Red or pink foam, without tissue, is seen passing through the suction cannula or seen coming from cervix on curettage.
- A gritty sensation is felt as the cannula passes over the uterine wall.
- The uterus contracts over (or grips) the cannula making its introduction (and removal) difficult.

Results

- RPOC were present in 30% (34/112) of cases, and complete gestational sac was seen in 4 cases.
- The presence of RPOC was significantly correlated with nulliparity, the need for cervical dilatation, smaller gauge of suction cannula and volume of uterine contents.

Conclusion

RPOC are detected in almost one third of cases after suction evacuation of missed abortion, therefore, TVS at the end of the procedure should be routine step to ensure empty cavity.