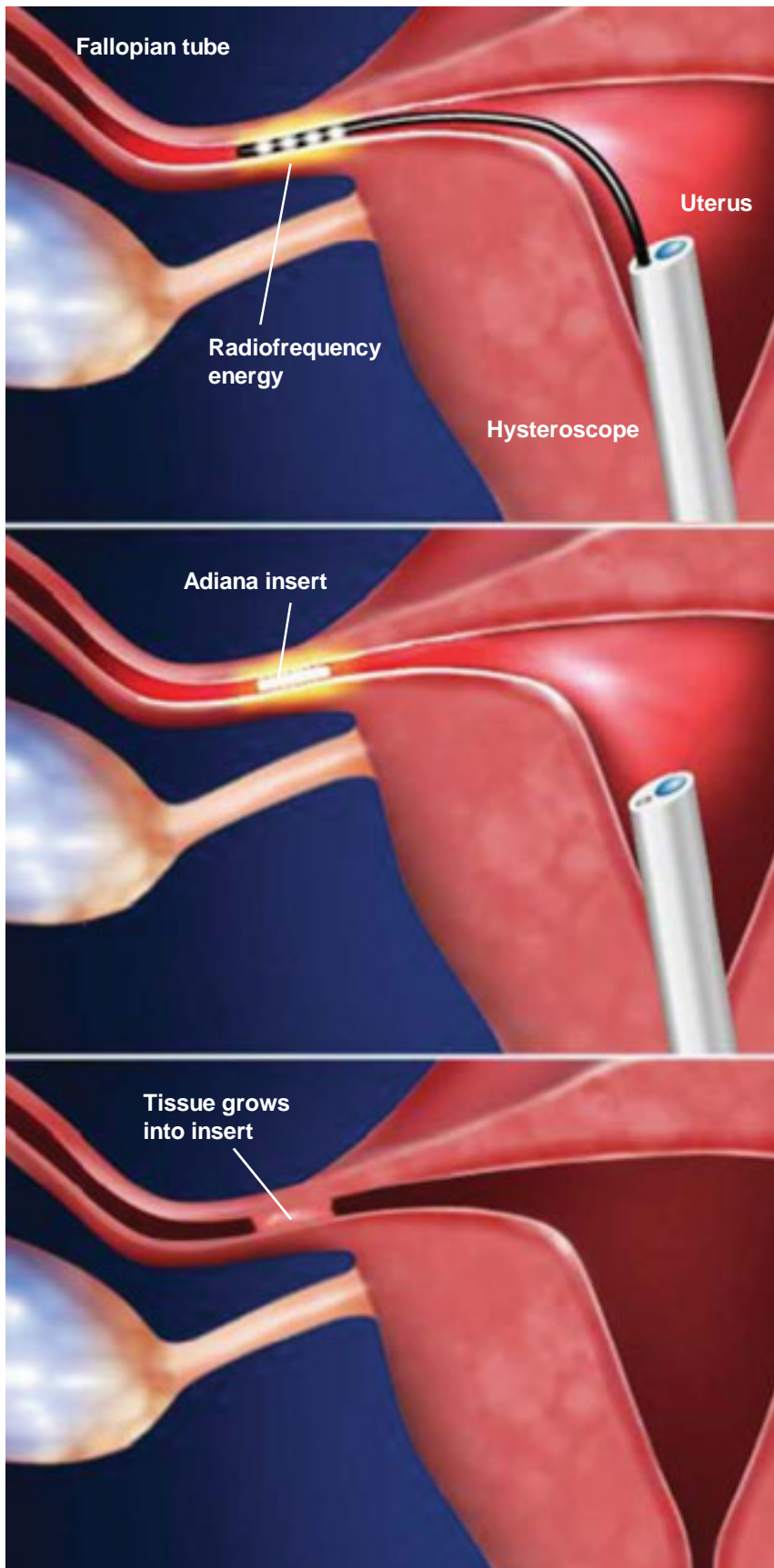


Hysteroscopic Tubal Occlusion (Adiana®)



Overview

During this procedure, which takes about 15 minutes to perform, the physician implants tiny inserts into openings of the fallopian tubes to permanently prevent pregnancy. Implantation of the Adiana inserts requires no incisions because it is performed through the opening of the cervix with the aid of a thin, telescopic instrument called a hysteroscope.

Preparation

In preparation for the procedure, the patient is positioned and anesthesia may be administered. A speculum is inserted into the vagina to allow access to the cervix. The physician inserts a hysteroscope into the vagina and carefully guides it through the cervix and into the uterus. The hysteroscope is equipped with a light, a camera and a channel for instruments.

Placing the Inserts

A thin instrument is pushed up through the hysteroscope and into the opening of one of the fallopian tubes. Once positioned, a low-level burst of radiofrequency energy is delivered through the instrument to damage the tissue at the entrance of the fallopian tube. Then, the physician deploys the tiny Adiana insert into this damaged tissue, where it blocks the entrance of the tube. The physician repeats these steps to block the other fallopian tube.

End of Procedure and Aftercare

When the procedure is complete, the instruments are removed and the patient will be able to return home. Over the next three months, the damaged tissue at the entrance of the fallopian tubes will grow into the Adiana inserts, permanently blocking the tubes to prevent pregnancy. The patient will need to use other birth control methods during this time. After three months, the patient will return for a hysterosalpingogram (an x-ray in which dye is injected into the uterus) or possibly a specialized ultrasound to confirm that the tubes are completely blocked.