

HyView® HSG and HyCoSy Catheter – A New Device For Use in Lipiodol Hysterosalpingography, a Medical Procedure That May Enhance Fertility Outcomes

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HyView® HSG and HyCoSy Catheter – A New Device for Use in Lipiodol Hysterosalpingography, a Medical Procedure That May Enhance Fertility Outcomes¹⁻⁵

WASHINGTON, UK (26 February, 2025) - Rocket Medical Plc recently launched the HyView HSG and HyCoSy Catheter. The device was developed for use in hysterosalpingography (HSG) and Hysterosalpingo Contrast Sonography (HyCoSy) imaging procedures, which are commonly used in the investigation of female infertility.

During the procedure, an imaging medium is instilled through the catheter to visualise the shape of the uterus and assess the patency of the fallopian tubes in real time, using fluoroscopy (HSG) or ultrasound (HyCoSy). Water-based media or Lipiodol® Ultra Fluid, an oil-based contrast, may be used.

Research has suggested that in addition to supporting the diagnosis of conditions related to infertility, the use of Lipiodol in HSG may increase pregnancy and live birth rates versus the use of water based contrast medium¹⁻³. There may also be benefits in patients with endometriosis: a New Zealand randomised trial showed enhanced fertility for up to 6 months following a Lipiodol flush, and for a longer period in women with unexplained infertility^{4,5}.

Despite the exciting developments in this field, there are limited suitable options for catheters when Lipiodol is used, as many are damaged after a short period of contact. HyView catheter reliability and integrity has been extensively tested, and can be used with Lipiodol for up to 60 minutes so clinicians can depend on the device to perform, even in more complex cases.

Managing Director, Daniel J. Agustus, PhD., said, "Research has demonstrated the important role that Lipiodol HSG may have in the management of patients seeking medical assistance due to infertility. HyView extends our existing HSG and HyCoSy catheter portfolio with a Lipiodol-resistant device, ensuring that we continue to meet the needs of clinicians as medical practice evolves."

The HyView catheter is now available in the UK, Ireland, the Netherlands, Australia and New Zealand, with additional market expansion anticipated. The device is available in 5FG without a stylet and 5FG with stylet, which may be useful in difficult insertions.

¹ <https://womenshealth.guerbet.com/products/lipiodol-ultra-fluid>, accessed 20 February, 2025

² Wang, R., van Welie, N., van Rijswijk, J., Johnson, N. P., Norman, R. J., Dreyer, K., Mijatovic, V., & Mol, B. W. (2019). Effectiveness on fertility outcome of tubal flushing with different contrast media: systematic review and network meta-analysis. *Ultrasound in obstetrics & gynecology : the official journal of the International Society of Ultrasound in Obstetrics and Gynecology*, 54(2), 172–181. <https://doi.org/10.1002/uog.20238>

³ Dreyer, K., van Rijswijk, J., Mijatovic, V., Goddijn, M., Verhoeve, H. R., van Rooij, I. A. J., Hoek, A., Bourdrez, P., Nap, A. W., Rijnsaardt-Lukassen, H. G. M., Timmerman, C. C. M., Kaplan, M., Hooker, A. B., Gijzen, A. P., van Golde, R., van Heteren, C. F., Sluijmer, A. V., de Bruin, J. P., Smeenk, J. M. J., de Boer, J. A. M., ... Mol, B. W. J. (2017). *Oil-Based or Water-Based Contrast for Hysterosalpingography in Infertile Women. The New England journal of medicine*, 376(21), 2043–2052. <https://doi.org/10.1056/NEJMoa1612337>

⁴ Johnson, N. P., Farquhar, C. M., Hadden, W. E., Suckling, J., Yu, Y., & Sadler, L. (2004). The FLUSH trial--flushing with lipiodol for unexplained (and endometriosis-related) subfertility by hysterosalpingography: a randomized trial. *Human reproduction (Oxford, England)*, 19(9), 2043–2051. <https://doi.org/10.1093/humrep/deh418>

⁵ Johnson, N. P., Kwok, R., Stewart, A. W., Saththianathan, M., Hadden, W. E., & Chamley, L. W. (2007). Lipiodol fertility enhancement: two-year follow-up of a randomized trial suggests a transient benefit in endometriosis, but a sustained benefit in unexplained infertility. *Human reproduction (Oxford, England)*, 22(11), 2857–2862. <https://doi.org/10.1093/humrep/dem275>

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