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Clinical Image

Spontaneous Expulsion of an Essure® Microinsert Seven Years After Its Insertion

Iacob Marcovici*

Deaprtment of Ob/Gyn, McLeod Health-Ob/Gyn Dillon, USA

Abstract

A case of late spontaneous expulsion of one Essure microinsert -seven years after its insertion- is described. This seems to be the first report of such a late event.

***Corresponding authors**

Iacob Marcovici, Department of Ob/Gyn McLeod Health-Ob/Gyn Dillon 705 North 8th Avenue, Suite 3B Dillon SC 29536, USA, Email: drimarcovici@yahoo.com

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Keywords

- Hysteroscopic sterilization
- Essure bilateral tubal occlusion
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INTRODUCTION

A case of spontaneous expulsion of an Essure® microinsert seven (7) years after its insertion is presented.

CASE

A 46 years old patient G2P1 had Essure® sterilization 7 years earlier. Her three months post insertion follow up hysterosalpingogram (HSG) did verified the presence of Essure® microinsert in each Fallopian tube (Figure 1). Five years after her sterilization the patient started complaining of heavy periods. The gynecological investigation at the time, found an 11cm length uterus with a few fibroids, the largest of about 4cm. Her symptoms subsided and two years later, the patient came back to our clinic with a coil in a bag saying "this is what came out of my vagina yesterday" (Figure 2). In order to evaluate the present status of her tubes, an HSG was done. The result did show no spillage of contrast medium from either tube and therefore the assumption is both tubes are blocked. Only the Left Essure® microinsert is present in the fallopian tube (Figure 3).

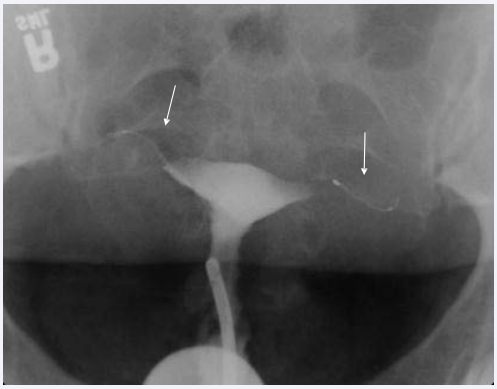

Figure 1 Three-Months follow-up after Essure sterilization. HSG shows successful Essure® bilateral tubal occlusion.

Figure 2 Essure coil brought by patient to the office.

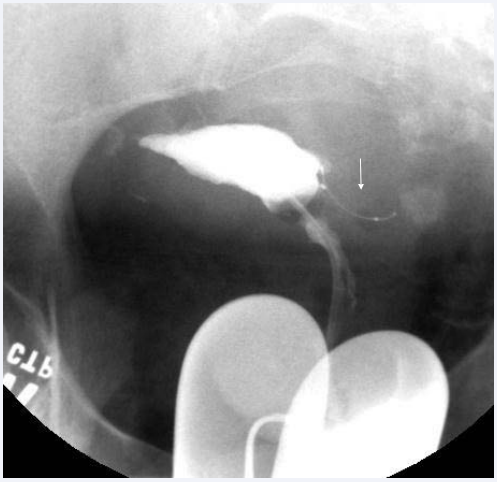

Figure 3 Seven years later: HSG-Bilateral occlusion present.

COMMENT

Essure® bilateral tubal occlusion is an elegant modality

of sterilization because requires no abdominal incisions. It is considered a permanent solution for sterilization. The Essure® microinsert is a 4cm microcoil made out of a stainless steel inner coil, an elastic outer coil of nitinol and a polyethylene terephthalate (PET) fibers contained within the coils. Once placed in the Fallopian tube the outer coil of nitinol expands and the PET fibers start inducing an inflammatory/fibrotic response that in time will occlude the lumen of the tube. The Manufacturer of Essure® recommends that an Essure Confirmation Test (basically a hystero- salpingogram) should be done 3 months after the procedure in order to confirm successful tubal occlusion.

While expulsion of the Essure® coil after insertion before the 3-month HCG mark was reported, I found only one case report by Garcia et al. [1] describing an expulsion at more than 3 months. In Garcia at all report, the expulsion occurred at about 14 weeks (2 weeks after the HSG confirmed the correct placement and the bilateral occlusion). They believe the microinsert expulsion occurred at 14 weeks after placement because of incomplete scarring of the Fallopian tube. When their patient got her period, the uterine contractile waves associated with menstruation just displaced the microinsert into the uterus and then expelled through the cervix.

In contrast, the present report is the first one describing a spontaneous expulsion of one Essure® microinsert *as far as seven years* after its insertion. The reasons of such a delay in expulsion are not clear and further investigation into the causes of such an event is warranted.

REFERENCE

1. Garcia AL, Lewis RM, Sloan AL. Essure insert expulsion after 3-month hysterosalpingogram confirmation of bilateral tubal occlusion and bilateral correct placement: case report. J Minim Invasive Gynecol. 2013; 20: 107-11.

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