How **accurate** is HyFoSy?

exem® foam
(air polymer-type A) intrauterine foam

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According to the **American College of Radiology**, "Hysterosalpingo-foam sonography (HyFoSy) in combination with 2-D or 3-D imaging has demonstrated improved accuracy of 93.7% and better concordance with laparoscopy compared with 2-D or 3-D air or saline HyCoSy for assessment of tubal patency."[1] The ACR also states, "Although HSG has been historically regarded as the imaging study of choice in assessing tubal patency, it is only 65% sensitive and 85% specific for diagnosing tubal patency when compared with laparoscopy with chromopertubation, which is widely accepted as the reference standard for evaluating tubal patency."[1]

HyFoSy[2] *vs.* HSG[1]

(when compared with laparoscopy with chromopertubation)

SENSITIVITY

99% — *HyFoSy will correctly identify **99 out of 100 patients** with tubal blockage*

65% — *HSG will correctly identify only **65 out of 100 patients** with tubal blockage*

SPECIFICITY

91% — *HyFoSy will correctly identify **91 out of 100 patients** without tubal blockage*

85% — *HSG will correctly identify only **85 out of 100 patients** without tubal blockage*

Wider implications of the findings: These findings can be used to establish a diagnostic strategy with high accuracy but minimum invasiveness, and limited use of contrast agents and sophisticated technology. 2D-Air/saline-HyCoSy, which has a high NPV, is suitable as an initial test and basic screening method, but 2D/3D-HDF-HyFoSy, which has a significantly higher PPV, can be used as a standard to verify any questionable or positive results obtained with 2D HyCoSy. This strategy may significantly reduce the need for laparoscopy as a reference standard.

About ExEm® Foam

The HyFoS Procedure utilizes ExEm® Foam ((air polymer-type A) intrauterine foam), an FDA-approved ultrasound contrast agent indicated for sonohysterosalpingography to assess fallopian tube patency in women with known or suspected infertility.

Important Safety Information: ExEm® Foam should not be used on patients who are pregnant, have known or suspected lower genital tract inflammation or infection, have had a gynecologic procedure within the last 30 days, have vaginal bleeding, or have known or suspected reproductive tract neoplasia. Common side effects include pelvic and abdominal pain, vasovagal reactions (and associated symptoms such as nausea and faintness), and post-procedure spotting. See full prescribing information (available at www.exemfoam.com/resources) for further details.

References:
1. Wall DJ, Reinhold C, Akin EA, Ascher SM, Brook OR, Dassel M, et al. ACR Appropriateness Criteria® Female Infertility. Journal of the American College of Radiology. 2020, 17(5): S113–24

2. Melcer Y, Zilberman Sharon N, Nimrodi M, Pekar-Zlotin M, Gat I, Maymon R. Hysterosalpingo-Foam Sonography for the Diagnosis of Tubal Occlusion: A Systematic Review and Meta-analysis. J Ultrasound Med. 2021; 40: 2031-2037