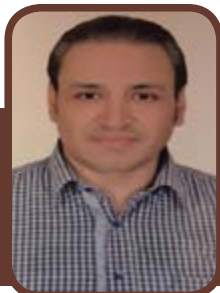


International Conference on **HEPATITIS**

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International Conference on **GYNECOLOGY AND OBSTETRICS**

October 29-30, 2018 | Amsterdam, Netherlands


Waleed Hamed Abdelbaky Aboelela

Al Nile IVF centre and Almery centre for IVF and Advanced Endoscopic Surgery, Egypt

Difficult hysteroscopy

One of the most distressing situation in hysteroscopy is tightly stenosed cervix. In many cases the hysteroscopist will try to dilate it using uterine sound or Hegar dilators which are completely risky as there is a possibility of creating a false passage. So considered a traumatic procedure. So, other steps to pass through this tight cervix. These steps will start by hydrodilatation and wait, hydrodilatation and twisting, hysteroscopy with step forward and backward technique,

hysrodilatation with twisting around scissor placed inside the uterine cavity hysrodilatation with gradually increasing hystroscopic diameter Using the hystroscopic scissor to dilate the pathway Vaginal misoprostol Hystroscopy during menses Advantage of non-traumatic cervical dilatation: 1- Under vision, 2- No false passage, 3- No blood will spoil the endometrium so no pathology will be missed.

Biography

Waleed Hamed Abdelbaky Aboelela has completed her MD degree on 2017 from Al Azher University Hospitals. Also he has spent about 4 years training at ART Unit of the international Islamic centre for population studies and research University. Now He is serving as the medical Director of Al Nile IVF centre and Almery centre for IVF and Advanced Endoscopic surgery. He also served as a Lecturer of obstetrics and gynecology department and director of endoscopy unit at Alazher University hospital (Assiut).

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