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Associate Editor

### Ultrasound-guided embryo transfer—a special role in patients with certain uterine defects

*To the Editor:*

Flisser and Grifo (1) have reviewed the role of ultrasonography during embryo transfer. Indeed, “clinical touch” of an experienced operator may obviate the need for ultrasonography in most cases. A special case, however, is embryo transfer in a patient with previous cesarean delivery. Often, the old uterine scar forms a tent-like structure anterior to the lower uterine segment, just posterior to the bladder wall. Especially in retroverted uterus, the advancing embryo transfer catheter may lodge in the uterine scar and miss the uterine cavity. The clinical “touch” may not distinguish between correct and

faulty scar placement of the embryos. Therefore, I would recommend ultrasonography in this special case to maximize pregnancy rate.

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### REFERENCE

1. Flisser E, Grifo JA. Is what we clearly see really so obvious? Ultrasonography and transcervical embryo transfer—a review. *Fertil Steril* 2007;87:1–5.

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