

# **The Value of Endocervical and Endometrial Lidocaine Flushing before Office Hysteroscopy: A randomized controlled study**

## **Summary**

Objective to evaluate the safety and efficacy of flushing the cervical canal and the uterine cavity with local anaesthetic in reducing the pain felt by the women during office hysteroscopy

Methods A double blinded randomized controlled study conducted between May 2018 and February 2019 on 260 women candidate for office hysteroscopy at Kasr Alainy hospital . They were randomized to intrauterine and intracervical instillation of either 5 ml of lidocaine 2% diluted in 15 ml normal saline or 20 ml of normal saline 5 minutes before the procedure. The primary outcome parameter was the pain score reported by the women during the procedure. Secondary outcomes included VAS at 10 and 30 minutes after the procedure, the need for analgesia and occurrence of vasovagal attacks.

Results Women in the lidocaine flushing group had significantly lower VAS score reported during the procedure ( $1.77\pm 1.088$  vs.  $5.23\pm 1.832$ ) and 10 and 30 minutes after it ( $1.31\pm 1.152$  and  $0.76\pm 0.925$  vs.  $4.27\pm 2.060$  and  $2.98\pm 1.960$ ) when compared to control women ( $P < 0.001$ ).

More women without lidocaine flushing experienced vasovagal attacks ( 25/130 vs. 9/130 ,  $P < 0.001$ ) and needed analgesia (84/130 vs. 13/130,  $P < 0.001$ ) when compared to women with lidocaine flushing.

Conclusion Flushing of the cervical canal and uterine cavity with local anesthetic significantly decreased pain sensation in women undergoing office hysteroscopy