



Effective Health Care

Imaging for the Diagnosis of Mullerian Duct Anomalies

Next Steps

The nominator is interested in research on imaging for diagnosis of mullerian duct anomalies.

Due to limited program resources at this time, AHRQ will not further assess this topic. No further activity on this topic will be undertaken by the Effective Health Care (EHC) Program.

Topic Summary and Considerations

Topic Name and Number: Imaging for the Diagnosis of Mullerian Duct Anomalies, #731

Date: 8/18/2017

Key question from the nomination:

What is the diagnostic accuracy of MRI compared to ultrasound for diagnosing mullerian duct anomalies?

- In normal early female development the müllerian ducts differentiate to form the fallopian tubes, uterus, uterine cervix and upper part of the vagina. Disruptions in the development process can lead to the absence or malformation of female reproductive organs. The most common mullerian duct anomalies involve the vagina and the uterus (1).
- Management is based on the extent and type of malformations. This requires accurate diagnosis and delineation of the anomaly (2, 3).
- Options for diagnosis include pelvic ultrasound (US), three dimensional ultrasound, magnetic resonance imaging (MRI), hysterosalpingogram, laparoscopy, and/or hysteroscopy. The nominator is asking specifically about the accuracy of US compared to MRI (2, 3).
- Due to limited program resources at this time, AHRQ will not further assess this topic.

References

1. Breech LL LM. Müllerian Anomalies. Obstetrics and Gynecology Clinics of North America. 2009;36(1):47-68.
2. Dietrich JE MD, Quint EH Obstructive Reproductive Tract Anomalies. Journal of Pediatric and Adolescent Gynecology. 2014;27(6):396-402.
3. Dietrich JE MD, Quint EH. Non-Obstructive Mullerian Anomalies. J Pediatr Adolesc Gynecol. 2014;27(1):386-95.