

Septate Uterus

Patient Information Series – What you should know, what you should ask.

What is a septate uterus?

The uterus has a cavity that is lined by endometrium: this is where a normal pregnancy implants. This triangular cavity lined by the endometrium will allow the pregnancy to grow. In septate uterus, the cavity is partially or completely divided. This might hamper implantation or pregnancy growth.

How does a septate uterus happen?

Septate uterus is an anomaly of uterine development. Two columns of cells fuse to form the uterus. The midline should disappear to form the uterine cavity. If the resorption fails a septum remains.

Could I have a septate uterus?

The septate uterus is the most frequent congenital uterine anomaly. 2% of women with no infertility and no miscarriage, might have septate uterus, while in women with infertility or miscarriage the rate increases to 3-15%.

How can I know if I have a uterine septum?

A conventional 2D ultrasound can suggest there is a septate uterus. Three-dimensional ultrasound allows precise visualisation of the septum. Hysteroscopy or magnetic resonance may also demonstrate the septum.

If I have this malformation, could I have other malformations?

The septate uterus may be associated with cervical and vaginal anomalies. It may be also associated with anomalies of the urinary tract but are much less frequent.

What is the treatment of the septate uterus?

It might be necessary to perform a hysteroscopic resection of the septum to improve reproductive outcomes. However, there is no clear indication to do so pre-emptively in women with no infertility or pregnancy loss record.

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