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Can noninvasive pelvic physical therapy open occluded fallopian tubes?

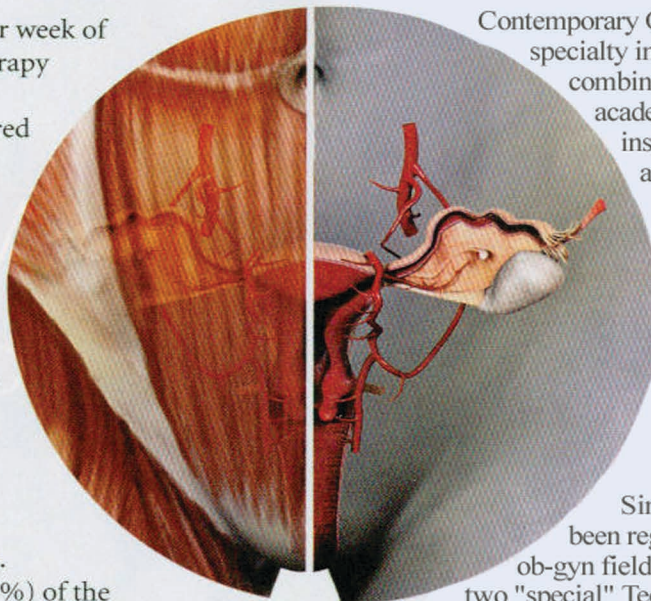
Twenty 1-hour sessions per week of manual pelvic physical therapy resulted in unilateral or bilateral patency as measured by hysterosalpingography or natural intrauterine pregnancy in 17 of 28 (61%, 95% exact CI, 41%–78%) formerly infertile women with occluded fallopian tubes, according to the results of a small, retrospective analysis.

Median time from last treatment to patency confirmation was 1 month. Slightly more than half (53%) of the 17 women responding to the treatment reported a natural intrauterine pregnancy.

The physical therapy was designed to address pain and restricted soft tissue mobility due to adhesions and micro-adhesions. Therapists accessed deeper structures, such as the fallopian tubes, indirectly by manipulating the peritoneum, uterine and ovarian ligaments, and neighboring structures.

The authors of the study concluded that since truly occluded tubes seldom reopen spontaneously, the place of such noninvasive therapy in the management of occluded fallopian tubes may best be as an adjunct to conventional procedures.

Wurn BF, Wurn LJ, King CR, et al. Treating fallopian tube occlusion with a manual pelvic physical therapy. *Altern Ther Health Med.* 2008;14:18-23.



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