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## REVIEW

# Transrectal ultrasonography in the diagnosis and management of ejaculatory duct obstruction

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Ejaculatory duct obstruction is a rare but treatable cause of male infertility. The most common etiologies include congenital anomalies of the wolffian and Mullerian ducts, trauma, and inflammation. The diagnosis of ejaculatory duct obstruction should be suspected in any azoospermic patient with low ejaculate volume. Transrectal ultrasonography is now the preferred imaging modality for these patients. Seminal vesicle aspiration documents the presence of obstruction, confirms the presence of intact spermatogenesis, and rules out more proximal obstruction. Seminal vesiculography provides important anatomic information that may be helpful in determining the best method of treatment. It is a useful adjunct during transurethral resection of the ejaculatory ducts. Transurethral resection of the ejaculatory ducts is the standard method of treatment for ejaculatory duct obstruction, but balloon dilation may be preferred in select patients with an extraprostatic obstruction of the ejaculatory ducts. The exact criteria for the diagnosis of partial ejaculatory duct obstruction are still unclear, and therapy for these patients should be considered investigational at this time.

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