Table 1. Characteristics of included studies – Foam-echo

Study	Participants (number, age, other important characteristics)	Comparison	Outcome measures	Comments	Risk of bias (per outcome measure)* †
Included in sys	stematic review Maheux-Lacroix, 2	2014 (9 studies)	1		1
Allahbadia, 1992	N at baseline: 129 Population: Subfertility	Intervention: sono-HSG Control: HSG	Sensitivity and specificity of sono- HSG and HSG.	Contrast of intervention: Saline + Air	Unclear (5/7: unclear; 2/7: low bias)
		Reference test: Laparoscopy			
Allahbadia, 1993	N at baseline: 27	Intervention: sono-HSG	Sensitivity and specificity of sono- HSG and HSG.	Contrast of intervention: Saline	Unclear (3/7: unclear;
	Population: Subfertility	Control: HSG Reference test: Laparoscopy			4/7: low bias)
Allahbadia, 1994	N at baseline: 53	Intervention: sono-HSG	Sensitivity and specificity of sono- HSG and HSG.	Contrast of intervention: Saline	Unclear (3/7: unclear;
	Population: Subfertility	Control: HSG			4/7: low bias)

		Reference test: Laparoscopy			
Allahbadia, 1992 (2)	N at baseline: 50 Population: Subfertility	Intervention: sono-HSG Control: HSG	Sensitivity and specificity of sono- HSG and HSG.	Contrast of intervention: Saline + Air	Unclear (3/7: unclear; 4/7: low bias)
		Reference test: Laparoscopy			
Battaglia 1996	N at baseline: 59	Intervention: sono-HSG	Sensitivity and specificity of sono- HSG and HSG.	Contrast of intervention: Saline	Some concerns (1/7: unclear;
	Population: Subfertility	Control: HSG			5/7: low bias; 1/7: high bias)
		Reference test: Laparoscopy			
Dijkman, 2000	N at baseline: 100	Intervention: sono-HSG	Sensitivity and specificity of sono- HSG and HSG.	Contrast of intervention: Saline + Galactose	Some concerns (6/7: low bias;
	Population: Subfertility	Control: HSG			1/7: high bias)
		Reference test: Laparoscopy			
Kozarzewski, 1995	N at baseline: 25	Intervention: sono-HSG	Sensitivity and specificity of sono- HSG and HSG.	Contrast of intervention: Galactose	Unclear (4/7: unclear;
	Population: Subfertility	Control: HSG			3/7: low bias)

		Reference test: Laparoscopy			
Reis, 1998	N at baseline: 44	Intervention: sono-HSG	Sensitivity and specificity of sono- HSG and HSG.	Contrast of intervention: Saline + Galactose	Unclear (3/7: unclear;
	Population: Subfertility	Control: HSG			4/7: low bias)
		Reference test: Laparoscopy			
Socolov, 2009	N at baseline: 95	Intervention: sono-HSG	Sensitivity and specificity of sono- HSG and HSG.	Contrast of intervention: Saline + Air	Some concerns (2/7: unclear;
	Population: Subfertility	Control: HSG			4/7: low bias; 1/7: high bias)
		Reference test: Laparoscopy			
Individual studi	es		1		1
Van Welie, 2022	N at baseline Intervention followed by control: 576 Control followed by intervention: 584	Intervention: Hystersalpingo-foam sonography (HyFoSy) Control: Hysterosalpingography (HSG)	Concordance between HyFoSy and HSG, Pain score (measured by Visual Analogue Scale (VAS); ranging from 1.0 to 10.0 cm), miscarriage (defined as the presence of non-vitality on ultrasound or spontaneous loss of pregnancy)	Women were allowed to take pain medication (e.g. paracetamol or naproxen) before both tubal patency tests.	Some concerns

	Age				
	33.0 (30.0 - 36.0)				
	BMI:				
	23.4 (21.0 – 26.6)				
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Dreyer, 2014	N at baseline	Intervention: HyFoSy	Pain experienced during the procedure as measured by VAS	No form of premedication was given before tubal patency	High concerns
	Intervention: 19	Control: HSG	scores (1.0–10.0 cm) obtained	testing.	
	Control: 20		immediately after the examination.		
	Age (mean (IQR)		Prognostic chance on natural		
	Intervention: 33.0 (6.0)		conception during the following 12		
	Control: 31.5 (10.0)		months		
	P=0.49				
	0.13		Unilateral and bilateral proximal occlusion		
			occiusion		
	BMI (kg/m2) (mean (IQR):				
	Intervention: 20.8 (4.6)				
	Control: 21.7 (6.2)				
	Subfertility type:				
	Primary subfertility:				

	Intervention: 12/19 (63%) Control: 17/20 (85%) Secondary subfertility: Intervention: 7/19 (37%) Control: 3/20 (15%) P=0.30				
Serrano González, 2022	N at baseline Intervention: 111 Control: 99 Age Intervention: 34.63 years (SD 3.2) (range 25–40) Control: 32.06 years (SD 3.1) (range 24–37) P = < 0.001 Medical history related to the internal genital tract: Intervention; 0% (0/82) Control: 8.41% (9/107)	Intervention: HyFoSy Control: HSG	Pain measured by the VAS. Tubal patency	Patients were premedicated with oral azithromycin (1 g) the night before the test, and with a step 1 WHO Pain Ladder drug (Aneker, 2021) 1 h before the test.	High concerns

	P=0.006				
Maxim, 2021	N at baseline Intervention: 29 Control: 27 Results are expressed as mean (low;high); Age Intervention: 31 (27.5;35) Control: 34 (30;36) P=0.1	Intervention: Hypos Control: HSG	Pain (VAS scale), side effects (such as vagal effects consisted of nausea and/or vomiting, dizziness, syncope, hypotension and bradycardia)	Women in both groups did not receive any pain medication before undergoing the procedure. Verbal anesthesia was used in all cases.	Some concerns

^{*}For further details, see risk of bias table in the appendix

VAS: Visual Analogue Scale

[†] For the studies included in the systematic review of Maheux-Lacroix (2014) the RoB is based on the risk of bias and applicability concerns of the studies based on QUADAS-2 presented in the supplementary data of the systematic review. When ≥ 3 of the areas were labeled as unclear, the overall RoB was unclear.