Ectopic Pregnancy in a Caesarean Section Scar Case Report

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Abstract
I report a rare case of ectopic pregnancy occurring in the scar of a previous caesarean section, diagnosed by ultrasonography of pelvis and confirmed with histopathological diagnosis. I present the clinical details and imaging findings, followed by discussion of the etiology, pathogenesis, and imaging of this condition.

Keywords: Caesarean scar pregnancy, Ectopic pregnancy, Dilatation and curettage, Trans vaginal ultrasonography, Caesarean scar.

Introduction
Ectopic pregnancy is one of the leading causes of mortality among women of child-bearing age group. Most of these ectopic gestations are located in the fallopian tube, ampulla being the most common location. However, ectopic pregnancies are also known to occur in the cervix, ovary, previous caesarean scar, and abdomen. Intramural pregnancy with implantation in a previous caesarean section scar is probably the rarest location for ectopic pregnancy [1]. This type of pregnancy is prone for complications like uterine rupture, life-threatening hemorrhage, and hypovolemic shock.

The true incidence of pregnancy occurring in a uterine scar has not been determined because so few cases have been reported in the literature. However, the incidence of such cases seems to be on the rise [1,2]. This may reflect both the increasing number of caesarean sections being performed and the more widespread use of the transvaginal scan that allows earlier detection of such pregnancies [3]. The diagnosis is usually made on ultrasonography and can be confirmed during laparoscopy and/or laparotomy.

Case Presentation
A 33-year-old woman had come for routine antenatal check up after 6 weeks of amenorrhea and positive urine pregnancy test. She has complaints of bleeding per vaginum. She had history of 2 previous caesarean sections; first one performed 5 years back for intrapartum fetal distress and the second one performed 2 years back due to complete placenta previa. Transabdominal sonography supplemented by transvaginal sonography revealed empty uterine cavity and empty cervical canal with a irregular heterogenous mass in anterior uterine segment, with a gestational sac measuring 0.4 cm corresponding to 4wks 1 day On Doppler examination peripheral rim of choriodecidual reaction vascularity was seen.

Patient underwent exploratory laparatomy with excision of mass and repair of lower uterine segment. Histopathology proved the diagnosis of ectopic pregnancy in the lower uterine segmen.

Figure 1: Trans abdominal Sonography shows irregular mass in lower uterine segment

Figure 2: Trans Vaginal 1 Sonography shows irregular mass in lower uterine segment with gestational sac within.

Figure 3: Doppler examination shows peripheral vascularity.
or the surgical. The medical or conservative treatment mainly

Two principal management options are available, the medical

Proposed ultrasound diagnostic criteria for diagnosis of an

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References

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