

Original Research Paper

Obstetrics And Gynecology

Scar Ectopic Pregnancy

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ABSTRACT

Scar ectopic pregnancy is a rarest form of ectopic pregnancy as we increasingly diagnosed all over the world. It is life threatening form of abnormal implantation of embryo.with the increasing rate of Caesarean section, there is substantial increase in this condition with better understanding of this disease.The early and accurate diagnosis with

timely management can prevent pregnancy complications such as hemorrhage, uterine rupture and preserve fertility.

KEYWORDS: Scar ectopic pregnancy, abnormal placentation, previous scar, hemorrhage.

INTRODUTION:

Scar ectopic pregnancy is becoming common all over the globe.lt is novel and life threatening form of abnormal implantation of embryo within the myomere i and fibrous tissue of previous scar following lscs,hysterectomy,dilatation and curettage, myomectomy and manual removal of placenta.

CASE REPORT

Mrs.X, 28 yrs old, G2P1L1, Previous LSCS 8wks 3 days, presented with c/o bleeding p/v.

O/e: conscious, oriented, no pallor stable vitals.

P/a: soft, not tender, not distended

P/s: bleeding present, os admits tip

P/v : uterus anteverted, bulky mobile cornices free,cervical excitation negative.

Investigations

Hb-10.2 gm%,platelets-3.2,BT,CT -normal,aPTT,PT,INR-normal,urine pregnancy test-positive,USG-uterus showed products of conception in the lower uterine cavity no definitive sac like structure seen.

Suspecting it to be a case of incomplete abortion,was posted for dilatation and evacuation.On attempting to curette patient developed profuse bleeding through the os ,hence decided for laparotomy.Laparotomy findings :no hemo peritoneum,there was bulge in the scar area of uterus on the right side.on cutting open the bulge,gestational sac like structure was seen and the same removed,and uterine incision closed in layers.bilateral tubes and ovaries -normal.patient was stable and discharged on 7 th POD

Discussion:

While dealing with patients with scarred uterus, if the ultrasound showed a low lying gestational sac, it should be viewed with high index of suspicion of scar ectopic pregnancy and should recheck your diagnosis before proceeding with the management .if we had diagnosis of scar ectopic pregnancy we would have posted that for elective laparotomy instead of curetting which can cause torrential bleeding. because our patient didn't develop such massive bleeding and early decision for laparotomy we were able to managed this patient.

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