

INTRODUCTION

Scar ectopic pregnancy is characterized by implantation of gestational sac within scar tissue from a previous cesarean section. With rising rates of cesarean sections, the incidence of scar ectopic is also increasing. However, scar implantation becomes particularly dangerous when there is an adherent placenta, sometimes necessitating emergency hysterectomy. The quality of life for women affected by this type of ectopic implantation deteriorates.

OBJECTIVES:

To understand pathophysiology, clinical significance, clinical findings, diagnostic challenges in management of cesarean scar ectopic pregnancy.

CASE REPORT:

- A 26-year-old gravida 2 para 1 living 1 with previous LSCS with last child birth 1 year back at 8 weeks of gestational age came with complaints of bleeding per vaginum. since 20days after taking Tab MTP kit and undergoing suction and evacuation for incomplete abortion.
- On general examination patient was conscious , oriented , afebrile with mild pallor, her vitals were stable. P/A soft and non-tender. p/v – uterus was found bulky , mild tenderness present and bilateral fornices were free.
- On USG – empty uterine cavity with presence of a gestational sac like structure with a tiny fetal pole without any cardiac activity on anterior wall of uterus. Her b-hcg was 3251IU/ml .
- Patient was taken up for laparotomy . There was a bluish coloured bulging on anterior wall of uterus. Excision of ectopic tissue with repair of uterus was done.



USG image showing gestational sac like near previous scar



longitudinal incision given over bluish bulge



Intraoperative caesarean scar ectopic tissue removal

DISCUSSION

Physician should be ectopic minded in order to Diagnosis and Decrease maternal morbidity and mortality. MRI plays important and role when USG is inconclusive/equivocal. Double layer closure of myometrial defect should be done. Early diagnosis leads to prompt diagnosis and improves the outcome by allowing the preservation of future fertility. The diagnosis of this type of ectopic pregnancy is very difficult and false negative diagnosis can lead to major complications.

CONCLUSION

This type of pregnancy may become complicated with uterine rupture and life-threatening hemorrhage. Therefore, early diagnosis of cesarean scar ectopic gestation using sonography combined with Doppler flow imaging is of paramount importance followed by confirmation of pelvic MRI if and when indicated.

REFERENCES

- J. Einenkel, P. Stumpp, S. Kosling, L.C. Horn, M. Hockel A misdiagnosed case of caesarean scar pregnancy.
- M.A. Rotas, S. Haberman, M. Levгур Cesarean scar ectopic pregnancies.