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A missed caesarean scar ectopic pregnancy may landed up in hysterectomy: a case report

Caesarean scar pregnancy (CSP) is a complex iatrogenic pathology, which represents a consequence of a previous caesarean section. It has had an exponential increase in recent years. Total incidence of ectopic pregnancy is 0.5-1.5%. Of these CSP had incidence of <5%.

We report a case of CSP that, following an initial apparently successful treatment, required surgical management due to heavy bleeding.

Case: A 40 year old G4P2L2Ab1 with previous 2 cesarean sections with history of 1½ months of amenorrhoea with spotting for last 15 days followed by lower abdominal pain and bleeding PV since 3 days at admission leading to diagnosis of threatened abortion confirmed on USG & managed conservatively. But, she had profuse bleeding one week after along with lower abdominal pain and hemodynamic instability for which she was immediately taken for evacuation in OT under USG guidance which revealed the suction cannula inside an empty uterine cavity and sac seen separately in lower uterine segment near caesarean scar site.

Examination findings: P/A- soft and non-tender. P/S & P/V-Os closed, dark coloured bleeding present.

On TVS in OT: a gestational sac was identified at the lower uterine segment with no cardiac activity and empty uterine cavity, bilateral adnexa were normal, possibly scar pregnancy

Intraoperative findings: Gestational sac and products of conception was found attached to scar site which was invading lateral wall up to uterine artery. Total hysterectomy was done. Post operative period was uneventful.

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