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A case of missed ovarian ectopic pregnancy

Pregnancy implanted in ovary is called ovarian ectopic pregnancy. Increased incidence is reported with the increase in the use of IUCDs and artificial reproductive technology. It is usually diagnosed by vaginal USG or intra operatively.

A 21-year female gravida-2, para-1, living-1 referred to our hospital with Post-exploratory laparotomy status with severe pain in abdomen and beta HCG value 700 mIU/ml. Intraoperatively, the patient had hemoperitoneum with left ovarian cyst of approximately 3X3 cms, No other source of bleeding found. Patient was referred for further management with drain in-situ.

On examination- Patient had tachycardia.

On Per-abdomen examination- Soft, tenderness present, Drain in-situ with minimal collection.

Per-speculum examination- No active per vaginal bleeding present. cervix and vagina healthy.

Per-vaginal examination- Uterus anteverted, normal sized, bilateral fornices clear.

On admission her haemoglobin was 10 gm% with deranged coagulation profile. Beta HCG was repeated and its value was 2720 mIU/ml.

USG abdomen-pelvis was done with evidence of mild to moderate collection with internal echoes in pouch of Douglas. Hemoperitoneum present. Evidence of multiple dilated tortuous vessels noted in bilateral adnexal region.

Treatment- The patient was managed conservatively with IV antibiotics and beta HCG was repeated every 48 hours with a decreasing pattern.

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