

## Successful surgical management of cervical ectopic pregnancy

Dr Remya Aryad , Dr Sujana  
Molakatalla

Blacktown Hospital

### Abstract

Cervix is an unusual site for an ectopic pregnancy , which is difficult to treat as there is the potential for severe hemorrhage , which can result in hysterectomy. This case of cervical ectopic pregnancy was the result of an IVF pregnancy , conservatively managed for 12 weeks and then required hysteroscopy, D&C .

### Background

Cervical ectopic pregnancy is an uncommon form of ectopic pregnancy in which the pregnancy implants into the cervical mucosa, below the level of the internal os. They account for less than 1% of all ectopic pregnancies, with a reported incidence of 1 in 1000–95 000 pregnancies. Management options for cervical ectopic pregnancy range from conservative drug therapies to radical surgical procedures

### Case

A 31 year old lady ,who conceived by IVF was monitored for pregnancy of unknown location with inappropriately rising BHCG , consistent with an ectopic pregnancy . USS done at 6 weeks identified a gestational sac close to lower uterine segment .A repeat USS at 8 weeks demonstrated a gestational sac of 15 mm in the cervical canal with feeder vessels. Treatment with methotrexate was deferred and conservative management was adopted. The patient was monitored with BHCG and USS. Cervical ectopic was unchanged in size at 18 weeks , but BHCG became negative. As the patient had continuous bleeding she underwent hysteroscopy and dilatation and curettage with interventional radiologist as standby to intervene in case of uncontrolled bleeding. The procedure was uncomplicated and patient recovered well.

### Discussion

The incidence of cervical ectopic is approximately 1 in 9000 deliveries . It accounts for less than 1% of all ectopic pregnancies and has adverse outcome on future fertility . Though etiology of cervical pregnancy is unknown, it is likely to result from a combination of factors, such as previous dilatation and curettage, Asherman's Syndrome, previous caesarean section, previous cervical or uterine surgery and in vitro fertilization–embryo transfer. Trans-vaginal ultrasound improves visualization in cases of early cervical pregnancy. Following diagnosis, conservative medical or surgical management can be undertaken in an attempt to avoid hysterectomy and preserve fertility.



### References

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