



DYNAMICS OF SURGICAL MANAGEMENT OF ECTOPIC PREGNANCY IN A REGIONAL BASE HOSPITAL IN SRI LANKA : AN AUDIT

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Introduction

- Ectopic pregnancy is a common cause of morbidity and mortality in early pregnancy with its incidence of around 2-3%.
- Surgical management is the mainstay of treatment for patients not suitable for conservative or medical management of an ectopic pregnancy.

Aims

- To review the patient, practitioner and system-related factors involved in the surgical management of ectopic pregnancy.
- To identify ways to reinforce and improve the relevant standards of care.

Methods

- A retrospective audit via a case notes review of 34 patients who underwent surgical management for ectopic pregnancy in District Base Hospital, Theldeniya, Sri Lanka from January 2022 to January 2023 were reviewed for data collection in this audit.
- Data was analyzed by SPSS version 24 and described using percentages and frequencies.

Results

- Mean age of study group was 28.1 years (SD±5.17) with mean gestational age of 6.3 weeks (SD±2.86) at presentation.
- Abdominal pain (91.2%) and vaginal bleeding (35.3%) were the most frequent presenting symptoms. (**Chart 3**)
- Majority has initial medical review (94.1%) and ultrasound (70.6%) within 2 hours. (**Chart 1**)
- Main indications for surgery were; free fluid in scan (82.6%), deteriorating clinical status (61.8%) and elevated/rising B-hCG (29.4%). Mean Decision-to-Surgery interval was 64.4 minutes (SD±24.32). Laparotomy was the only available route of surgery.
- 97.1% (N=33) were at fallopian tube while one case of ovarian ectopic was noted. Ampulla was the commonest tubal site (78.8%), while 12.1%, 6.1% and 3% were in isthmus, fimbria and interstitial part respectively. (**Chart 2**)
- Most patients had a leaking (64.7%) or ruptured (27.3%) ectopic and, over 500 mL haemoperitoneum was noted in 38.2%.
- Blood transfusion was required for 20.6% during the hospital stay. Majority (88.2%) were discharged by post-operative day 2 and, none had a major intra- or post-operative surgical complication.

Discussion

- Prompt initial assessment, triage and decision making, access to ultrasound/blood bank/theatre facilities and good surgical training are important aspects in proper surgical management of ectopic pregnancy.
- Availability of laparoscopy would facilitate the quicker post-operative recovery while minimizing surgical morbidity.

Chart 1. Percentage of patients evaluated

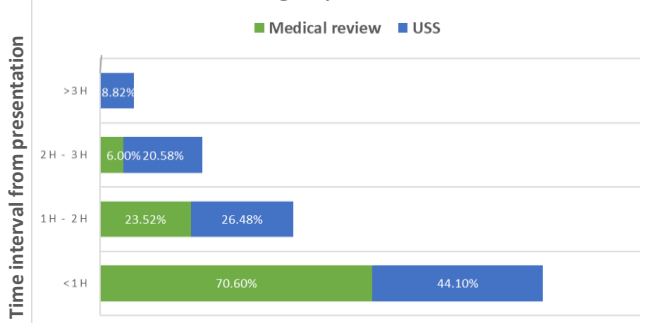


Chart 2. Site of the ectopic pregnancy

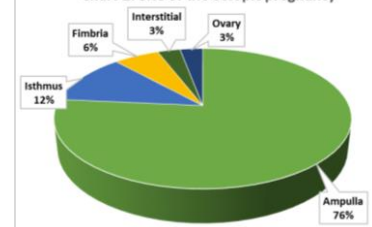
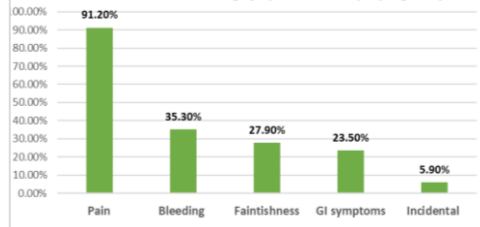


Chart 3. Presenting symptoms of ectopic pregnancy



References

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Disclosure

Authors have no conflict of interest to declare