

# COEXISTENT TUBAL AND INTRAUTERINE PREGNANCY

## (A Case Report)

by

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The simultaneous occurrence of intra-uterine and extrauterine pregnancy is a rare phenomenon. Kobak (1957) has used term "Utero-ectopic" gestation. Novak (1926) was first to review cases reported in the literature. Mitra (1940) reviewed 304 cases in 1940 and added 2 of his own. Cases have also been reported by Palanicham (1976) and Nagpal and Parikh (1978). We are adding one more case to the literature because of its rarity.

### CASEREPORT

Mrs. S. N. aged 28 years was admitted on 6-6-1979 for amenorrhoea 3 months and pain in the abdomen 1 day. Her previous menstrual cycles were regular and last menstrual period was 3 months back. She was primigravida and was married for last 6 months.

On admission she had marked pallor, pulse was 140/min. and B.P. 128/80 mm of Hg. Other systems were normal. There was rigidity and fullness in lower abdomen.

Pelvic exam: Cervix pointing downwards and backwards with os closed. Uterus was anteverted about 10-12 weeks pregnancy size. There was marked tenderness in posterior fornix. She was diagnosed as a case of ectopic pregnancy and taken for needling and laparotomy. Under all aseptic precautions needling was done and altered blood came from

posterior fornix. She was taken for laparotomy under general anaesthesia. The peritoneal cavity was full of dark coloured blood and clots. The uterus and tubes were identified. There was a rupture of the ampullary portion of right tube and the foetal sac was adherent to the ruptured portion. Right side salpingectomy was done and the material was sent for histopathological examination. The uterus was soft and about 12 weeks size. It was handled gently and a spinal needle was introduced in the cavity. Clear liquor was seen and the diagnosis of combined intrauterine and ectopic pregnancy was made. Plication of round ligaments was also done. Abdomen was closed in layers. Postoperatively she was given Injection Ampicillin I/V and symptomatic treatment. She was given 900 cc of 0 group Rh + ve blood during operation. She was also given Inj. Pro-luton depot 250 mgm weekly. There was a superficial stitch abscess which required daily dressing. Vaginal cytology was carried out on 28-6-1979 to assess the status of intrauterine pregnancy but 2 days after this, she complained of pain in abdomen and bleeding per vagina.

On vaginal examination internal os was open with products of conception in the cervical canal. She was given 5 units of Syntocinon in 5% Dextrose drip. She expelled a male foetus of 3½ months along with placenta and umbilical cord (Fig. 1). The abortion was complete and she did not need evacuation. She was discharged after 10 days.

Histo-pathological report: (Fig. 2)—Old healed salpingitis with decidua.

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### Summary

One case of coexistent intra and extra-uterine pregnancy is reported. Its incid-

ence, problems of diagnosis and prognosis are discussed. *References*

#### *Acknowledgement*

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*See Figs. on Art Paper V*