ECTOPIC PREGNANCY FOLLOWING LAPAROSCOPIC STERILISATION

(A Case Report)

by

KIRAN M. S.

and

S. N. UPADHYAY

Failure of sterilisation with falope ring resulting in an ectopic pregnancy is of some interest and is being described because of its rarity. To our knowledge no such case has so far been reported.

CASE REPORT

R. K. 35 years, Para 3 came for persistence of vague abdominal pain, dysuria, frequent vaginal bleeding and dysmenorrhoea. There was one and a half months amenorrhoea which was followed by severe pain in lower abdomen and fainting attack with slight vaginal bleeding. Laparoscopic sterilisation was done on her 3 years back. On abdominal examination there was fullness and tendenness of the lower abdomen, particularly on the left side. On pelvic examination uterus was found retroverted and bulky. A soft illdefined pelvis mass was

From: Upadhyay Institute of Gynaecology & Obstetrive, Kankarbagh Road, Patna 800 020.

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felt in the Pouch of Douglas which was extending on to the left fornix. Right fornix was clear. Provisional diagnosis of ectopic pregnancy was made.

On opening the abdomen a pelvic haematocoele was found extending from the Pouch of Douglas to the left ovary.

The appearance of the two tubes was interesting. On the left side there was dilated fimbrial end with a small quantity of organised blood clots. Tracing it medially there was a falope ring on its upper border about 2.5 cms. from the fimbrial end. Ring was covered with filmy adhesions. There was a thin band 1 cm. long and thickness of 000/chromic catgut connecting the fimbrial end near the falope ring to the cornual end the tube which had separated apart following the mechanical crush and its subsequent healing. The right tube was totally blocked 2 cms. from the cornual end with fluid blood inside the lumen and the falope ring on the top of it laterally. The retracted fimbrial end was 1 cm. away from the cornual end.

Hysterectomy with left salpingoophorectomy right sided salpingectomy was performed.