

## CERVICAL PREGNANCY

### (A Case Report)

by

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#### Introduction

A case of cervical pregnancy is reported because of its rarity.

#### Case Reports

Miss T. W., 34 year, was admitted for heavy painless vaginal bleeding since one day. The present episode of bleeding started as normal period. Flow had been heavy with clots since last four years.

There was a bulge posteriorly just above the external os almost like ballooning of cervix, uterus size could not be well defined. Profuse bleeding through os was present. Fleshy tissues looking like products of conception were intimately adherent to endocervix virtually eating up the endocervix. Frozen section report came as products of conception confirming the diag-

nosis of cervical pregnancy. Products of conception were removed by suction evacuation and curettage. Mattress sutures were put at 3 and 9 O'clock position as high as possible and cervix was again firmly packed. Bleeding from cervical canal could not be arrested by these conservative procedures. Patients BP dropped to 60 mm of Hg. Therefore a quick total abdominal hysterectomy was performed. Three units of blood were transfused during the procedure. Post-operative period was uneventful and patient was discharged on 8th post-operative day.

#### Gross Examination of hysterectomy specimen (Fig. 1)

Uterine length was 5.5 cm from fundus till int. os. Uterocervical junction of open specimen was markedly irregular with foci of haemorrhage extending in a zone measuring 6.5 x 3.8 cm from uterocervical junction till ext. os.

Histopathology report:—parturient uterus with implantation of placental tissue at uterocervical junction and in the endocervical canal.

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*See Fig. on Art Paper III*