A Rare Type of Heterotubal Pregnancy with Twisted Theca Lutein Cyst (A Case Report)

S. Samal, U. Gupta, R. Sukhadeve

Department of Obstetrics & Gynaecology, Mahatma Gandhi Institute of Medical Sciences, Sevagram, Wardha, Maharashtra, India – 442 102.

Mrs. S. D. 25 years of age came to the Department of Obstetrics and Gynaecology of Mahatma Gandhi Institute of Medical Sciences, Sevagram, Wardha in emergency with history of amenorrhoea of four months, severe colicky pain in the abdomen since two days and history of vomiting and bleeding per vaginum. She was married since 5 years and was a third gravida with two live issues. She was pale, had tachycardia, BP was 100/60 mm Hg. Abdominal examination revealed uterus of 22 weeks size, more than the period of gestation; there was tenderness, guarding, rigidity in the lower abdomen. There were two lumps one in each iliac fossa measuring 15 cms x 10 cms each. Abdominal paracentesis was positive for haemoperitoneum. Bimanual fornicial palpation revealed tenderness in right fornix along with bilateral large cystic masses. Haemoglobin percentage was 6.8 gm. USG revealed molar pregnancy with bilateral theca lutein cysts with torsion of right cyst with haemoperitoneum. Serum



Fig. 1 shows gangrenous right theca lutient cyst. Arrow shows dilated gangrenous fallopian tube with ectopic pregnancy.

 β HCG was 47924 iu / ml. The molar pregnancy was evacuated and exploratory laparotomy done which revealed around 300 cc of altered blood. Uterus was 18 weeks size, right ovary showed evidence with a large (15 cm x 10 cm) theca lutein cyst which was twisted thrice along with the tube. The cyst and tube both were gangrenous (Fig. 1). Right salpingo-oopherectomy was performed. The left theca lutein cyst of 10 cms x 12 cms was punctured at multiple sites. Postoperative period was uneventful. Histopathology revealed molar pregnancy with right tubal ectopic pregnancy in the wall of fallopian tube (Fig 2) with twisted right theca lutein cyst. HCG repeated 6 weeks after evacuation was 31920 iu/ml. The patient was given Injection methotrexate in a dose of 25 mg IM on alternate days for two doses. On follow-up her serum β HCG was decreased to 2.5 iu/ml at the end of three months.



Fig. 2 shows presence of chorionic villi in midst of haemorrhage.