PICTORIAL ESSAY





Nightmare at MTP: Scar Ectopic

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Twenty-eight years, gravida-3 para-2 with two and half month's amenorrhea with previous two LSCS with USG report (Figs. 1, 2, and 3) showing 11 weeks single intrauterine pregnancy presented for MTP.

MTP was started under GA. As soon as dilator was introduced, profuse bleeding started. Quickly evacuation was attempted, and POCs were evacuated as much as possible. Though, the bleeding had reduced, there was persistent and significant trickle. Uterine massage was given along with oxytocin drip and intramuscular carboprost. The patient still had blood trickling out, and USG showed collection of clots in lower part of uterus. Thinking it could be due to incomplete evacuation, another attempt at curettage resulted in torrential bleeding again, and bleeding reduced after curette was removed. Uterine packing was done with

condom catheter but bleeding persisted. Hence, decision for laparotomy with SOS hysterectomy was taken. On opening abdomen, uterus was almost normal size with lower segment ballooned suggestive of scar pregnancy (Figs. 4 and 5). Total hysterectomy (Fig. 6) was done, and the patient was given three packed cells transfusion. Postoperative recovery was uneventful.

On retrospective evaluation of USG reports, pregnancy was seen in the lower uterine segment with thinning of myometrium. Hence, it is important to keep in mind possibility of scar ectopic in cases of previous LSCS even when USG report is given as intrauterine pregnancy.

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Fig. 1 USG showing intrauterine gestational sac in lower uterine segment



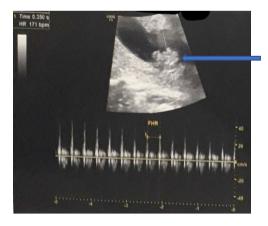
USG showing intrauterine gestational sac in lower uterine segment

Fig. 2 USG showing gestational sac implanted near lower uterine segment cesarean scar site



USG showing gestational sac implanted near lower uterine segment caesarean scar site

Fig. 3 Ultrasonography showing single live intrauterine gestation



USG showing single live intrauterine gestation



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Fig. 4 Intraoperative picture of uterus showing thinned out lower uterine segment

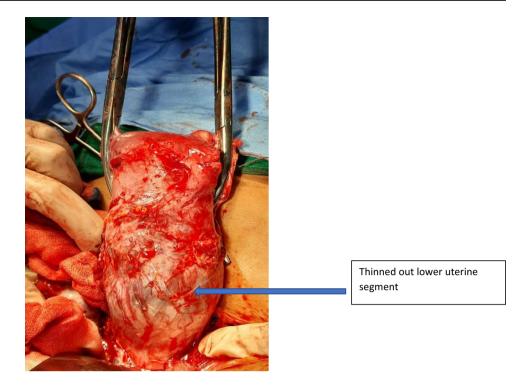


Fig. 5 Post-hysterectomy specimen showing scar ectopic pregnancy

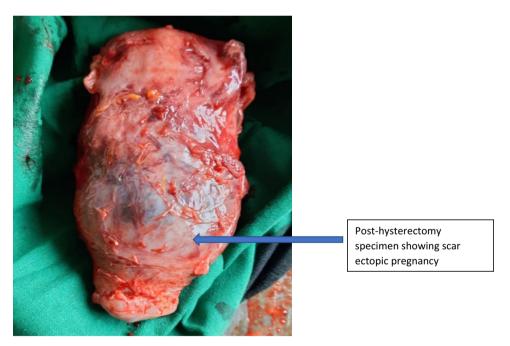
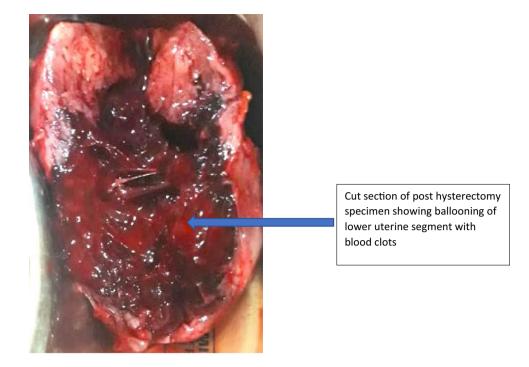




Fig. 6 Cut section of post-hysterectomy specimen showing ballooning of lower uterine segment with blood clots



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