



## Comments on Manuscript: Interstitial and Cornual Ectopic Pregnancy: Conservative Surgical and Medical Management

Ibrahim A. Abdelazim<sup>1,2</sup> · Svetlana Shikanova<sup>3</sup> · Bakyt Karimova<sup>3</sup> · Mukhit Sarsembayev<sup>4</sup> · Tatyana Starchenko<sup>4</sup> · Gulmira Mukhambetalyeva<sup>4</sup>

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Dear Respectable Editor,

We read the article “Interstitial and Cornual Ectopic Pregnancy: Conservative Surgical and Medical Management by Dagar et al., published in the *J Obstet Gynecol India*. 2018; 68(6): 471–476” with great interest.

Dagar et al. mentioned in the abstract of their article that interstitial and cornual ectopic pregnancy is rare, accounting for 2–4% of ectopic pregnancies, and remains the most difficult type of ectopic pregnancy to diagnose [1, 2]. In addition, they mentioned in their conclusion that early diagnosis and timely management are the key points in the management of the interstitial and cornual ectopic pregnancy [1].

Dagar et al. mentioned in their introduction that by definition, a cornual pregnancy refers to the implantation and

development of a gestational sac in one of the upper and lateral portions of the uterus and they reported three cases of interstitial and cornual ectopic pregnancy [1].

Dagar et al. used the term of cornual pregnancy in the discussion, and they stated that medical treatment with single methotrexate injection is an alternative to surgical treatment of cornual pregnancy. However, it is associated with significantly increased risk of failure, subsequent uterine rupture and emergency surgery [1]. Dagar et al. stated in the discussion that cornual pregnancy with an initial  $\beta$ -hCG < 5000 IU/ml is usually treated successfully with single-dose methotrexate [1].

We think that Dagar et al. consider both the interstitial and the cornual pregnancy in their article as one type or one entity of ectopic pregnancy, although the interstitial ectopic pregnancy is a totally different type of ectopic pregnancy than the cornual pregnancy.

Moawad et al. in the *American Journal of Obstetrics and Gynecology* (2010) wrote “interstitial pregnancy sometimes is mistakenly referred to as cornual pregnancy and frequently confused with angular pregnancy” [3].

Sargin et al. in the *Journal of Clinical and Diagnostic Research* (2015) wrote “interstitial and cornual ectopic pregnancy can be used in the place of each other. However, they actually describe two different entities” [4].

In addition, Rizk et al. stated that the term “cornual ectopic pregnancy” should only be used in a rudimentary uterine horn, a unicornuate uterus, the cornual region of a septate uterus, a bicornuate uterus, or a uterus didelphys [5]. The current version of William’s *Obstetrics* supports the lemmas of Moawad et al., which describe cornual pregnancy as a conception that develops in the rudimentary horn of a uterus with a Müllerian anomaly [3].

✉ Ibrahim A. Abdelazim  
dr.ibrahimanwar@gmail.com

Svetlana Shikanova  
shik.sv@mail.ru

Bakyt Karimova  
bakyt7@mail.ru

Mukhit Sarsembayev  
muhit130372@mail.ru

Tatyana Starchenko  
tatanastar18@mail.ru

Gulmira Mukhambetalyeva  
guli-76-02@mail.ru

- <sup>1</sup> Professor of Obstetrics and Gynecology, Ain Shams University, Cairo, Egypt
- <sup>2</sup> Consultant of Obstetrics and Gynecology, Ahmadi hospital, Kuwait Oil Company, Ahmadi, Kuwait
- <sup>3</sup> Professor of Obstetrics and Gynecology, Department №1, Marat Ospanov, West Kazakhstan State Medical University (WKSMU), Aktobe, Kazakhstan
- <sup>4</sup> Post-graduate Diploma (PGD), Department of Obstetrics and Gynecology №1, Marat Ospanov, West Kazakhstan State Medical University (WKSMU), Aktobe, Kazakhstan

## Conclusion

Interstitial pregnancy sometimes is mistakenly referred to as cornual pregnancy and frequently confused with angular pregnancy. The term “cornual ectopic pregnancy” should only be used in a rudimentary uterine horn, a unicornuate uterus, the cornual region of a septate uterus, a bicornuate uterus, or a uterus didelphys.

## Compliance with Ethical Standards

**Conflict of interest** The authors declare no conflict of interest related to this article.

## References

1. Dagar M, Srivastava M, Ganguli I, et al. Interstitial and cornual ectopic pregnancy: conservative surgical and medical management. *J Obstet Gynecol India*. 2018;68(6):471–6. <https://doi.org/10.1007/s13224-017-1078-0>.
2. Abdelazim IA, Nussair B, Zhurabekova G, et al. Comment on an intrauterine gestational sac surrounded by thin myometrium at fundus. *J Med Ultrasound*. 2018;26:168–9. [https://doi.org/10.4103/jmu.jmu\\_58\\_18](https://doi.org/10.4103/jmu.jmu_58_18).
3. Moawad NS, Mahajan ST, Moniz MH, et al. Current diagnosis and treatment of interstitial pregnancy. *Am J Obstet Gynecol*. 2010;202(1):15–29. <https://doi.org/10.1016/j.ajog.2009.07.054>.
4. Sargin MA, Tug N, Ayas S, et al. Is interstitial pregnancy clinically different from cornual pregnancy? A case report. *J Clin Diagn Res*. 2015;9(4):QD05-6. <https://doi.org/10.7860/jcdr/2015/12198.5836>.
5. Rizk B, Holliday CP, Abuzeid M. Challenges in the diagnosis and management of interstitial and corneal ectopic pregnancies. *Middle East Fertil Soc J*. 2013;18:235–40. <https://doi.org/10.1016/j.mefs.2013.01.004>.

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