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Uterine evolution after One-Step Conservative Surgery: a case series in the management of Placenta Accreta Spectrum in a low-income country

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Objectives

In low-income countries, Placenta Accreta Spectrum (PAS) is mainly treated with hysterectomy, carrying high maternal risks. This study aimed to track the ultrasound evolution of the uterine scar segment and assess the potential benefits of One-Step Conservative Surgery (OSCS)

Methods

This study reports 4 single pregnancies with prenatal suspicion of focal PAS (2 low- and 2 high-risk) managed with OSCS, followed postpartum by pelvic ultrasound.

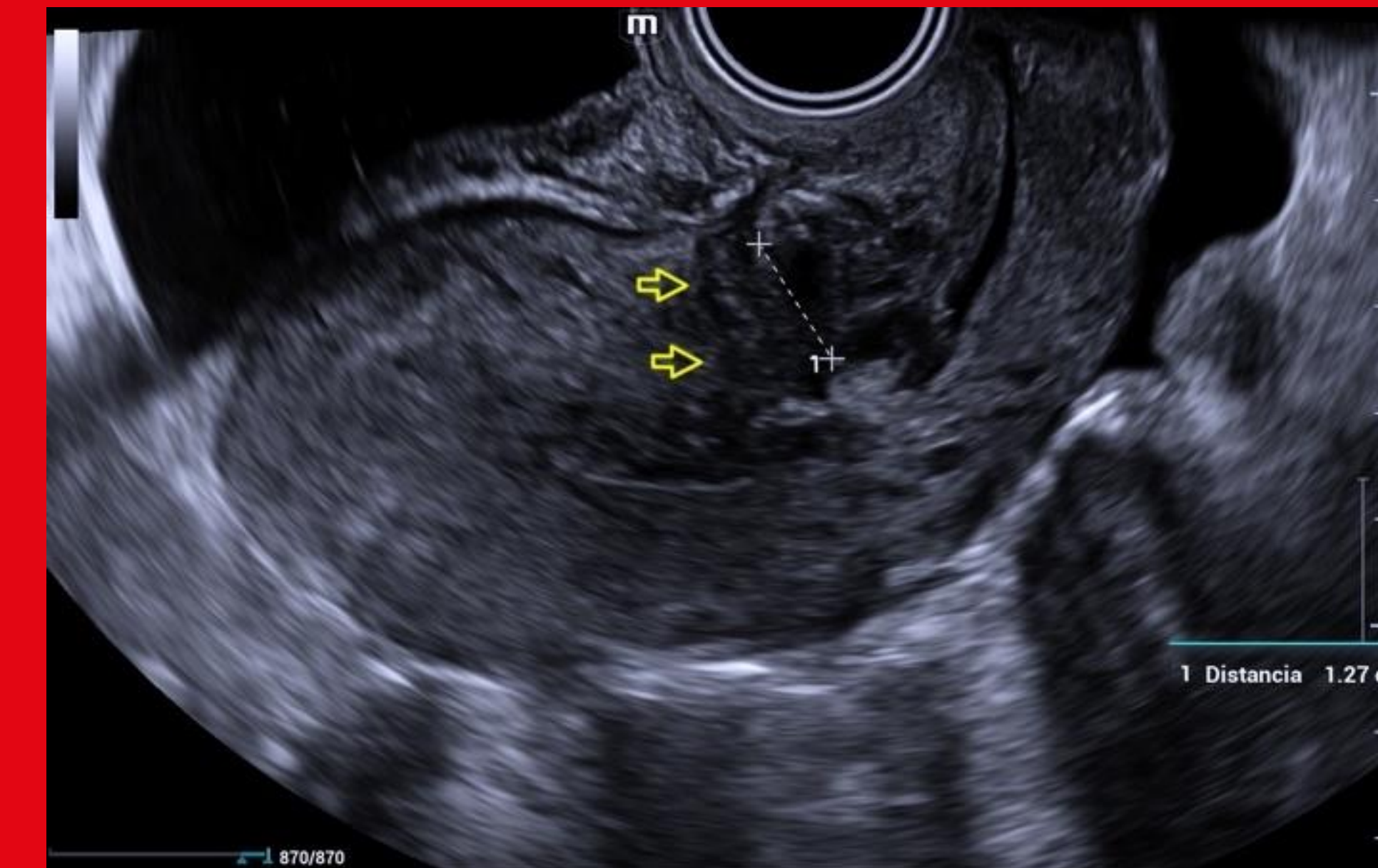
Conclusion

In low-income countries, OSCS may be an optimal option for focal PAS1–PAS3 when performed by trained teams. It appears to lower maternal morbidity and mortality, with no related symptoms or scar defects on follow-up. OSCS could be considered a safe and effective procedure

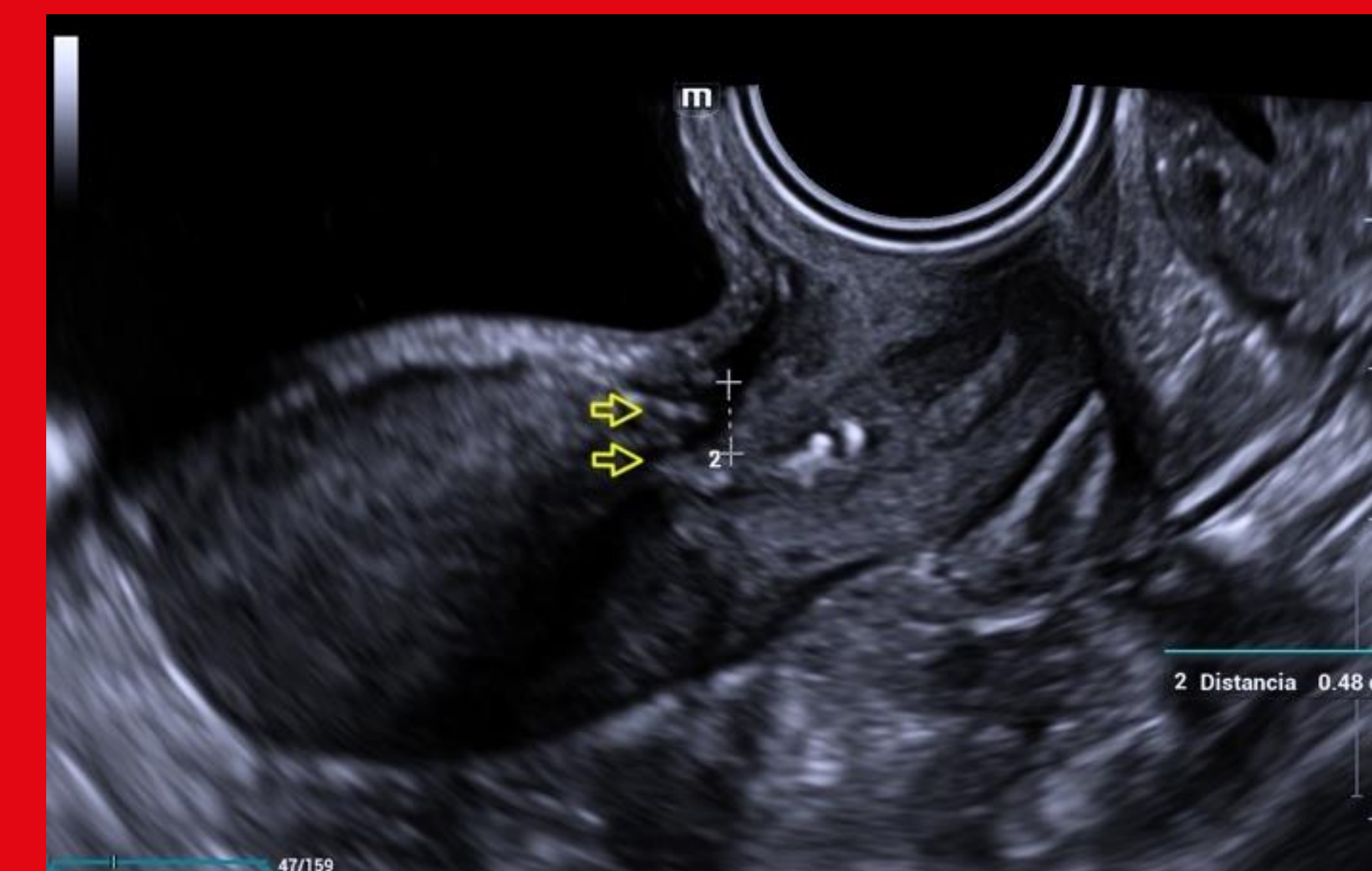
Results

Outcomes of 4 patients with placenta previa and ultrasound suspicion of focal PAS (2 intermediate, 2 high risk) were reported. Intraoperatively, 3 were PAS type 1 and 1 was type 3; all underwent OSCS without complications or transfusions. Postpartum ultrasound (1–12 months) showed myometrial integrity without indentations or niche in 100% of the cases. Only one reported new dysmenorrhea; no other symptoms.

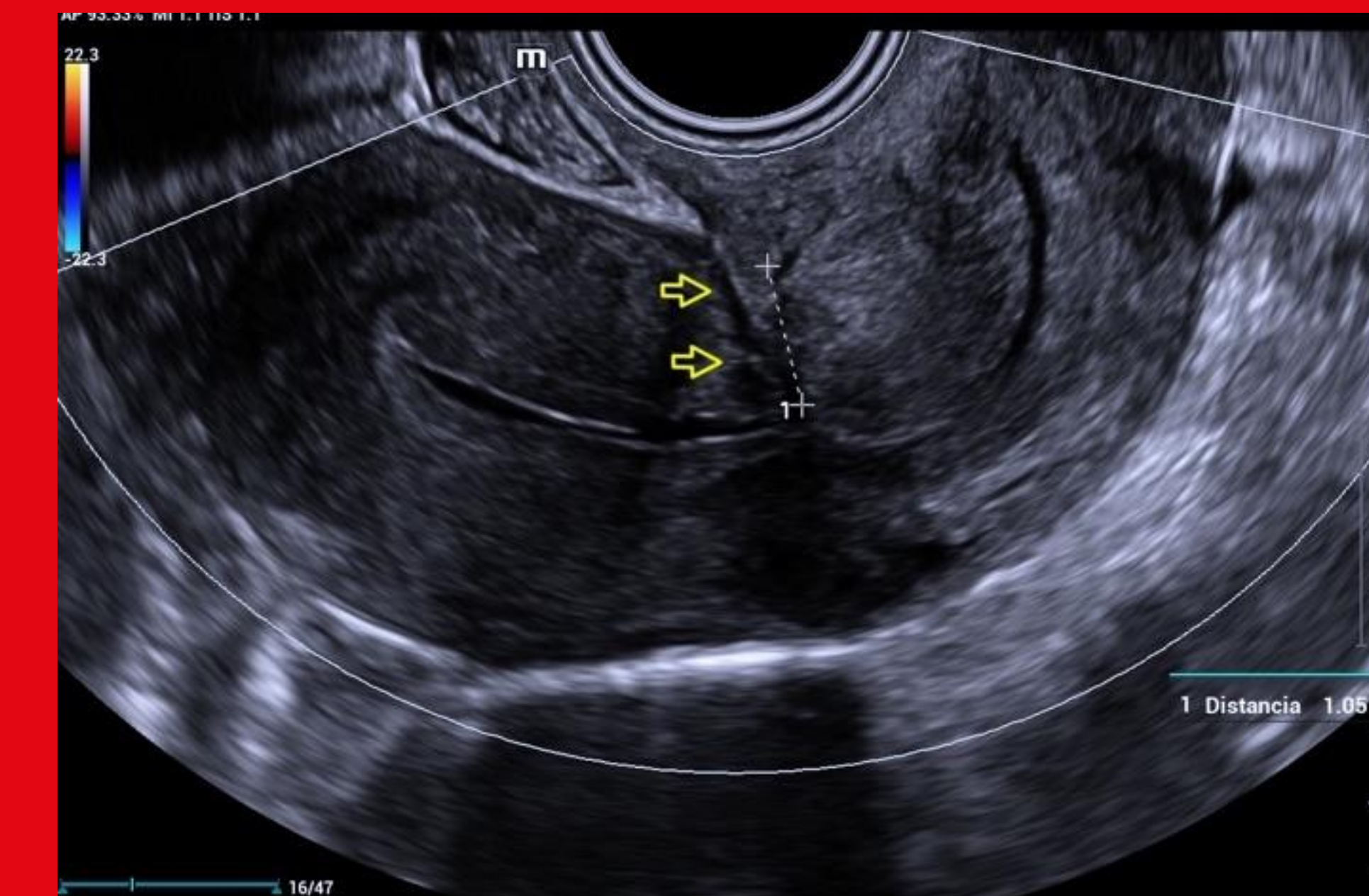
Time after
OSCS



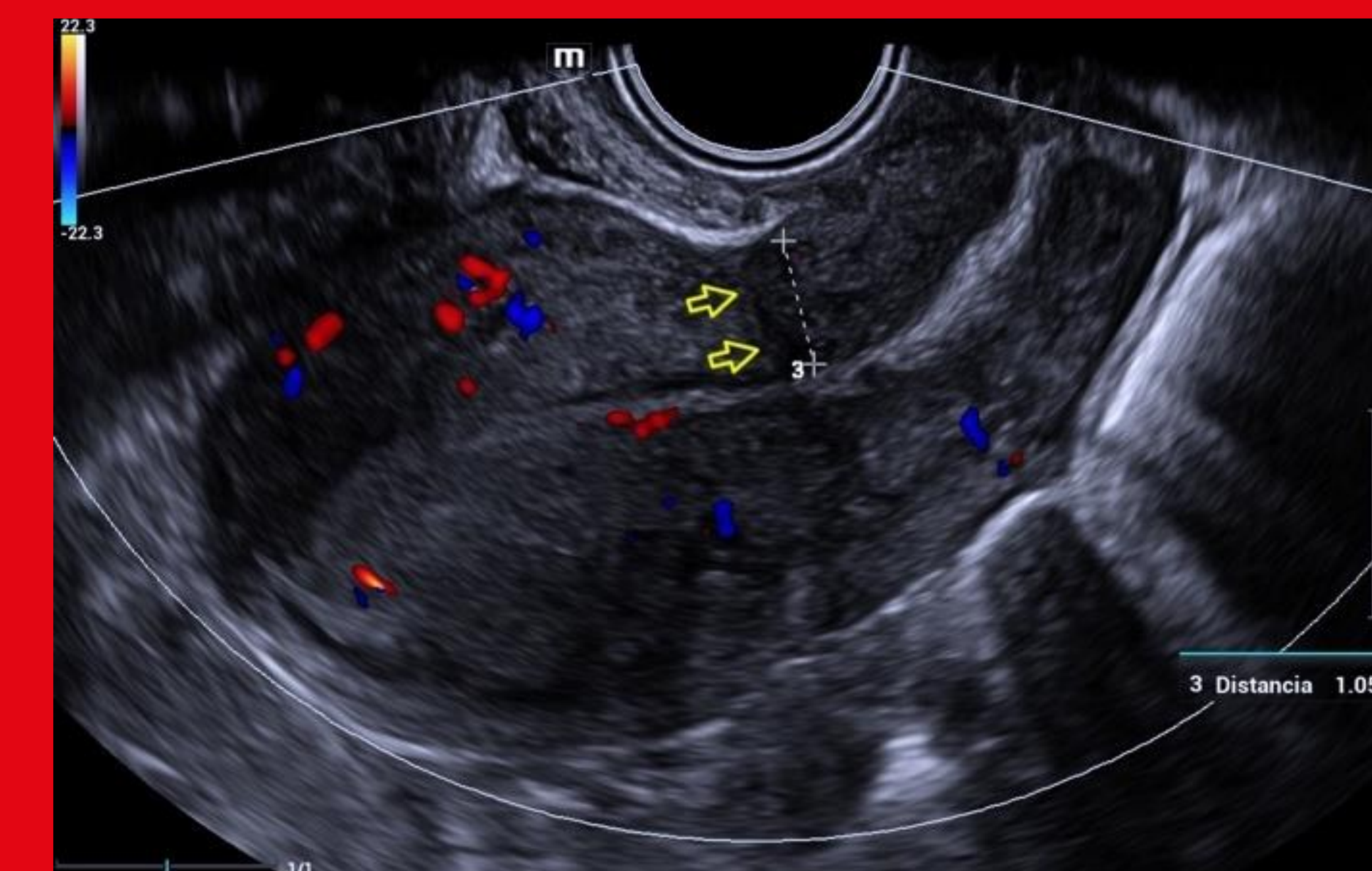
A. 1 month



B. 4 months with
fibrosis



C. 1 year



D. 8 months