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Intramural pregnancy mimicking cornual ectopic pregnancy in early stages: An imaging diagnostic challenge.

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Introduction

Intramural and cornual pregnancies are rare, high-risk ectopic gestations occurring outside the uterine cavity. Although they may appear similar on imaging, they differ in location and key features, with increased hemorrhage risk and mortality compared to tubal ectopics. This report highlights the importance of ultrasound differentiation for management.

Case Presentation

A 36-year-old woman (G2P0A1) presented with pelvic pain and minimal vaginal bleeding. Serum β -hCG was 272 mIU/mL. Initial transvaginal ultrasound suggested a right cornual ectopic pregnancy.

Imaging Findings & Management

Repeat imaging 24 hours later demonstrated an intramural pregnancy, based on absence of continuity with the endometrial cavity, myometrial embedding of the gestational sac, and absence of the interstitial line sign. The patient remained stable and was managed with intramuscular methotrexate and serial β -hCG until resolution.

Conclusion

Intramural pregnancy is rare and may mimic cornual implantation. Early diagnosis with transvaginal ultrasound is essential to guide management and avoid unnecessary surgery.

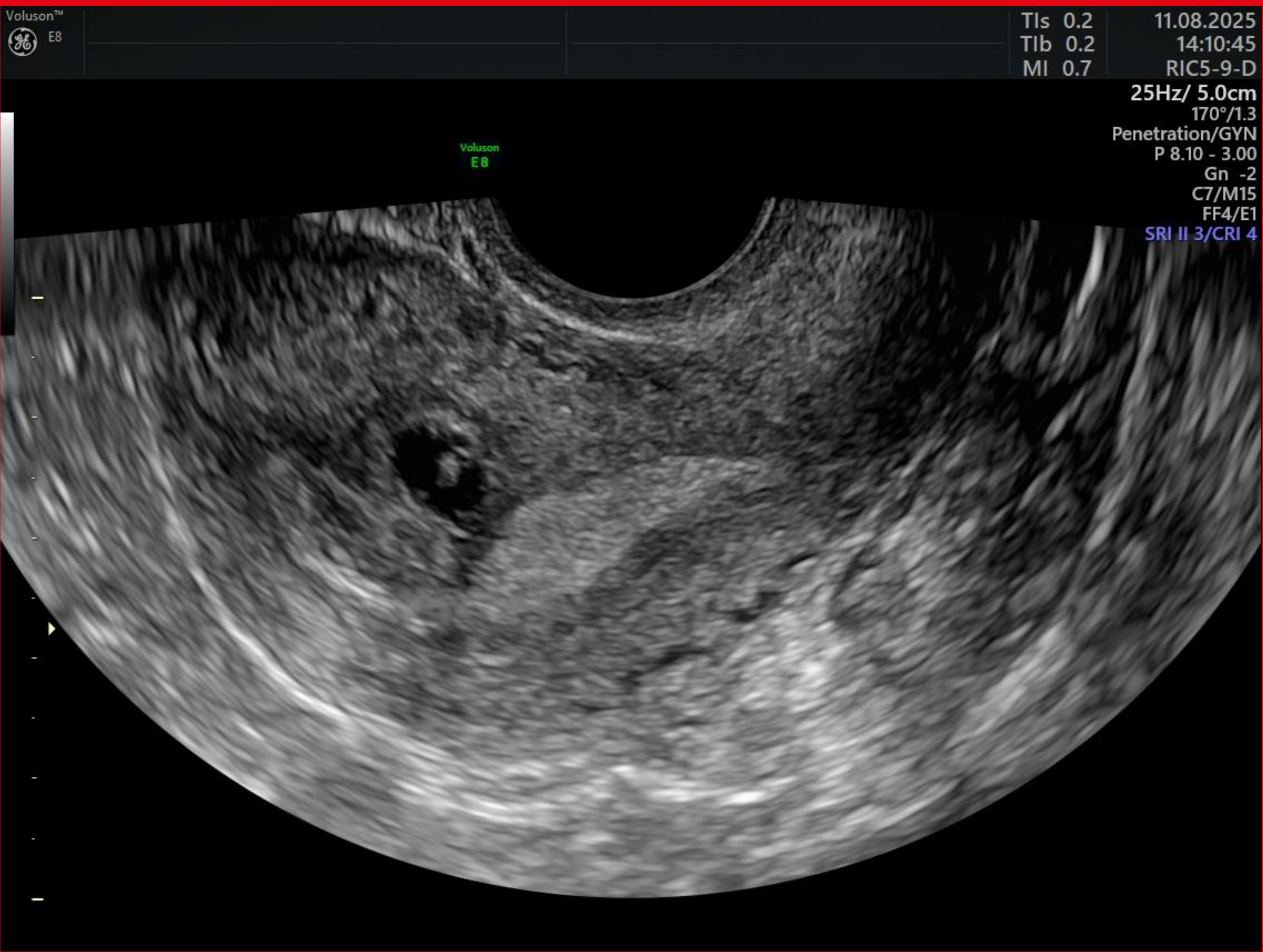


Figure 1. Intramural ectopic pregnancy with the gestational sac located outside the endometrial cavity and surrounded by myometrial tissue.

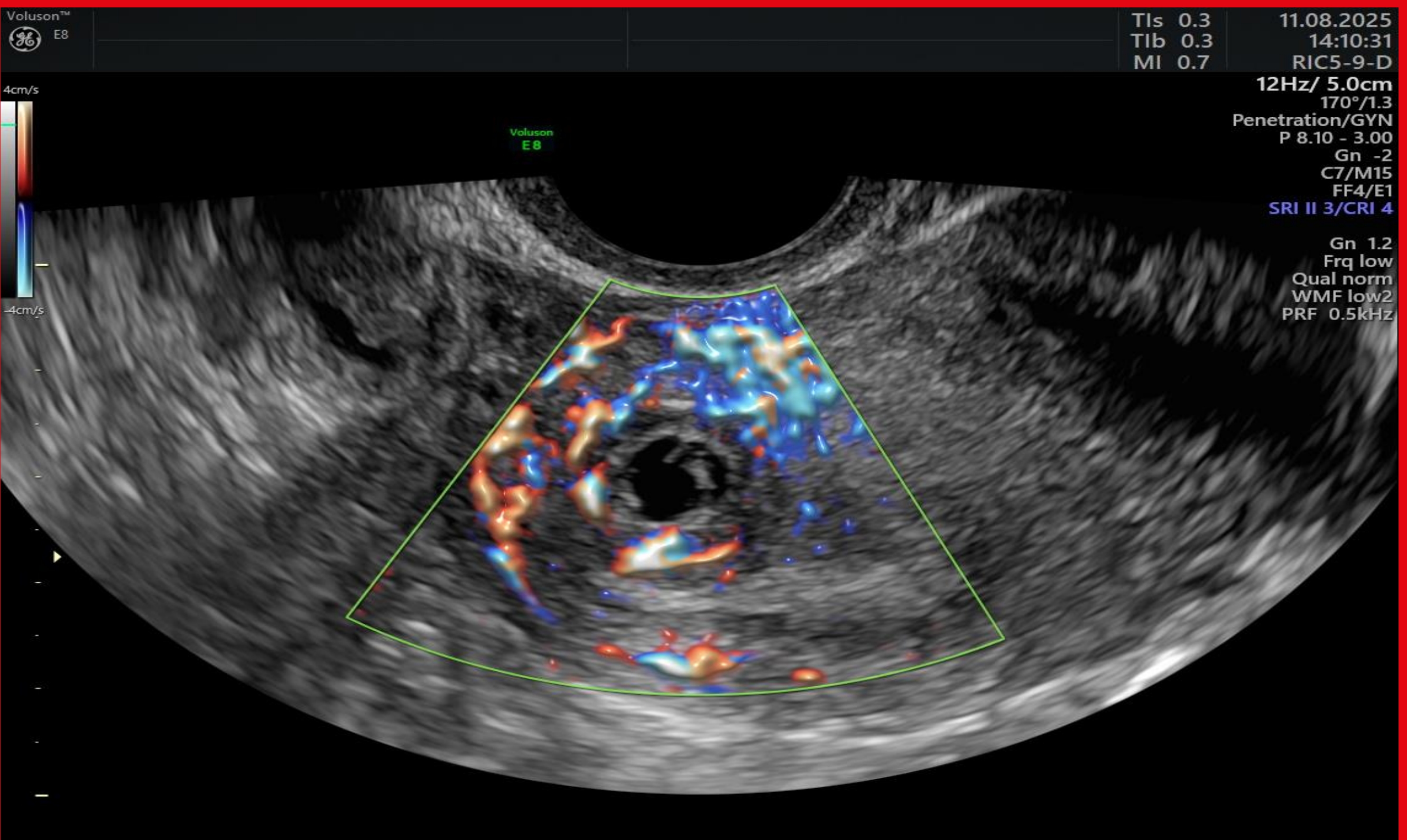


Figure 2. Transvaginal Ultrasound showing an intramural ectopic pregnancy with prominent peripheral vascularity demonstrated by color Doppler.