

EP03.58 Ultrasound diagnosis and successful medical management of bilateral tubal ectopic pregnancy: a case report

P. Opomu, K. Agholor

Introduction

Ectopic pregnancy occurs in approximately 1–2% of all pregnancies. Bilateral tubal ectopic pregnancy is an extremely rare condition, estimated to occur in approximately 1 in 200,000 pregnancies. Most cases are incidentally diagnosed intraoperatively during surgical management rather than preoperatively. Hence, only few cases ever have the opportunity to be considered for medical management.

Case presentation

We present a case of a 28-year-old para 0+3 woman who presented with 8 weeks amenorrhoea and lower abdominal pain. Transvaginal ultrasound scan demonstrated bilateral adnexal masses (blob and bagel signs) with an empty uterine cavity; serum β -human chorionic gonadotropin (β -hCG) was 16186 mIU/mL. A diagnosis of bilateral tubal ectopic pregnancy was made. The patient was hemodynamically stable and met criteria for conservative management. She was treated with systemic methotrexate using multiple doses and treatment progress monitored with serial β -hCG levels/ultrasound examinations.

Result

Serial β -hCG measurements demonstrated an appropriate decline and follow-up ultrasound showed progressive resolution of both adnexal masses without surgical intervention. The patient later achieved spontaneous (intrauterine) pregnancy with good fetal outcome.

Conclusion

- This case highlights the importance of early pregnancy assessment and careful evaluation of **both adnexa** during ultrasound scan in suspected ectopic pregnancy.
- Selected cases of bilateral tubal ectopic pregnancy can be **successfully managed with medical therapy**.

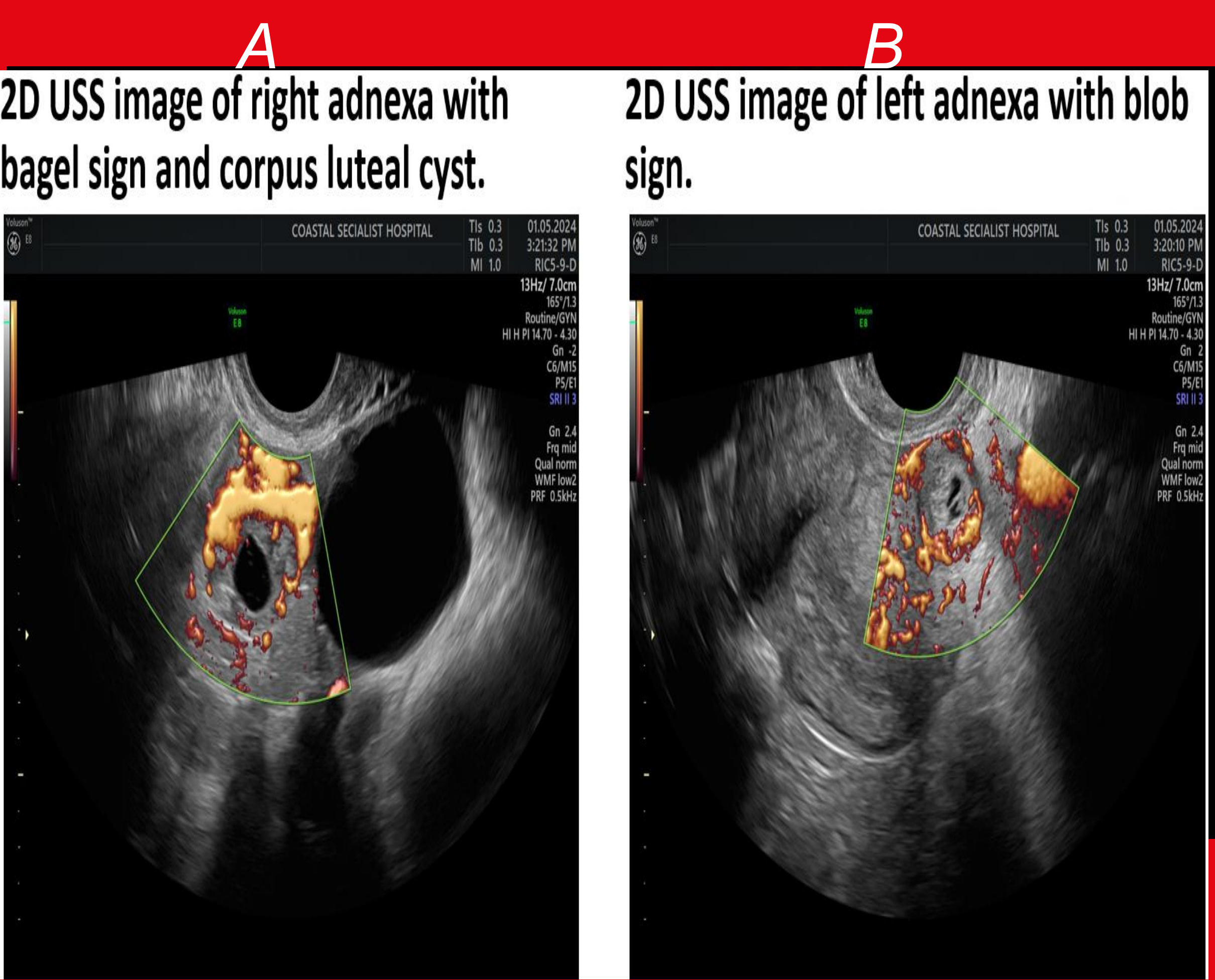


Figure 1. 2D images of ectopic gestation at both adnexa (arrow) and corpus luteal cyst at the right adnexa.

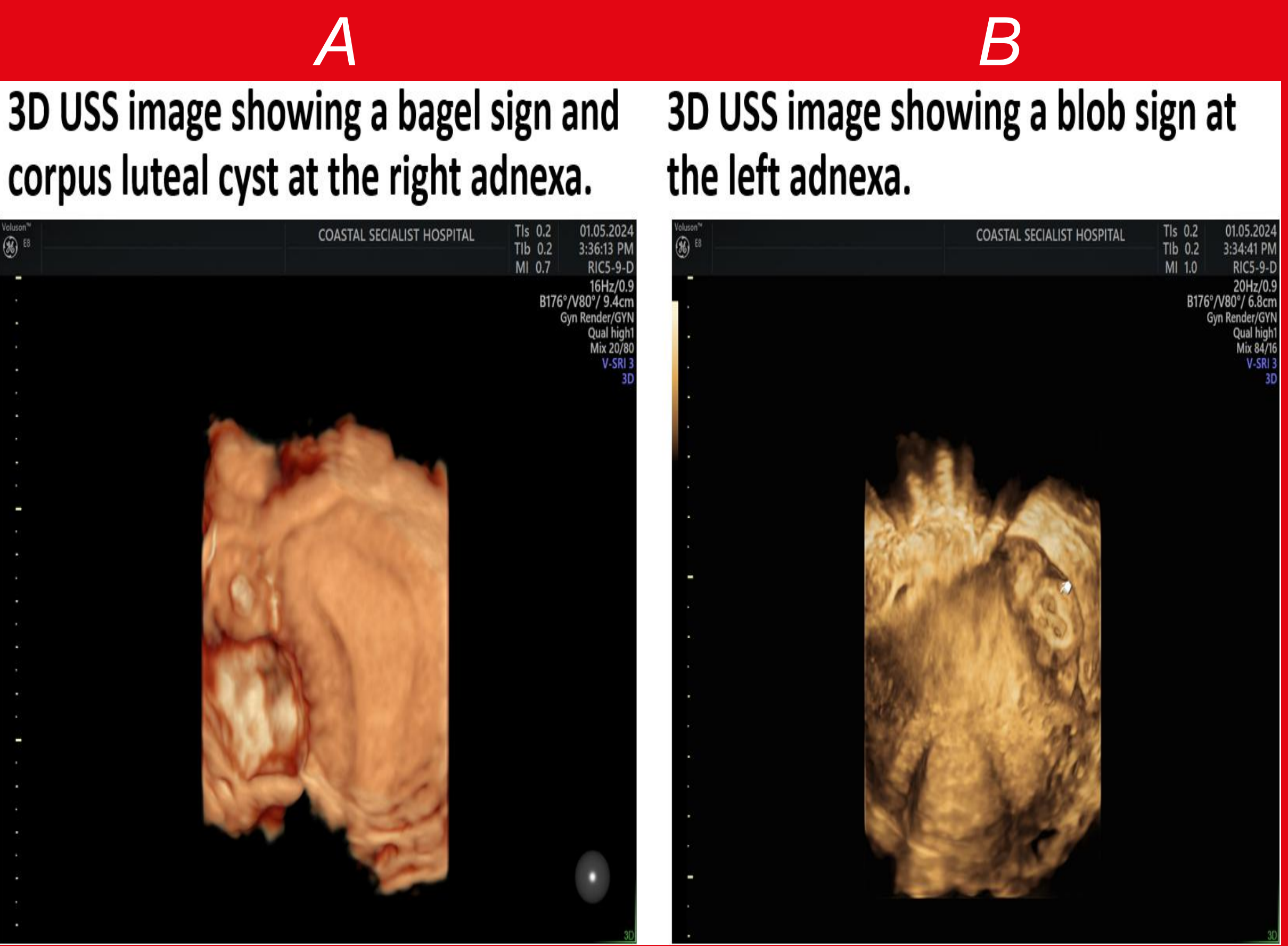


Figure 2. 3D images of ectopic gestation at both adnexa (arrow) and corpus luteal cyst at the right adnexa.