

EP03.59

First-trimester sonographic diagnosis of a rudimentary horn pregnancy

Maya Muhlbauer Avni, Suzan Abd Elgani, Adi Dayan-Schwartz, Liron Kogan, David Danon

Department of Obstetrics and Gynecology, Emek Medical Center, Afula, Israel
Rappaport Faculty of Medicine, Technion-Israel Institute of Technology, Haifa, Israel



Introduction

Rudimentary horn pregnancy (RHP) is a rare, potentially life-threatening condition (1 in 76,000–150,000 pregnancies), typically occurs in a non-communicating hemi-uterus. It carries a high risk of rupture, usually between 10–20 weeks of gestation. Early diagnosis is critical but remains challenging.

A case report

A 31-year-old woman presented at 7+6 weeks gestation with suspected ectopic pregnancy. Transvaginal ultrasound demonstrated a viable embryo within a gestational sac located separately from the main uterine cavity. The uterus appeared unicornuate with no intrauterine gestation. A distinct gestational sac was identified in a contralateral structure, surrounded by a well-defined myometrial mantle, with no continuity to the endometrial cavity or cervical canal. Color Doppler revealed marked peripheral vascularity. 3D ultrasound findings were consistent with a non-communicating rudimentary horn pregnancy. Diagnosis was established by ultrasound findings alone.

Prompt laparoscopic excision of the rudimentary horn and ipsilateral tube was performed. Intra-operative findings were fully concordant with the sonographic assessment. There were no surgical or postoperative complications.

Conclusion

This case highlights the importance of systematic first-trimester ultrasound evaluation of uterine morphology and gestational sac location, and demonstrates that recognition of key sonographic features, supported by 3D ultrasound, enables accurate diagnosis, surgical planning and safe early management of this rare condition.

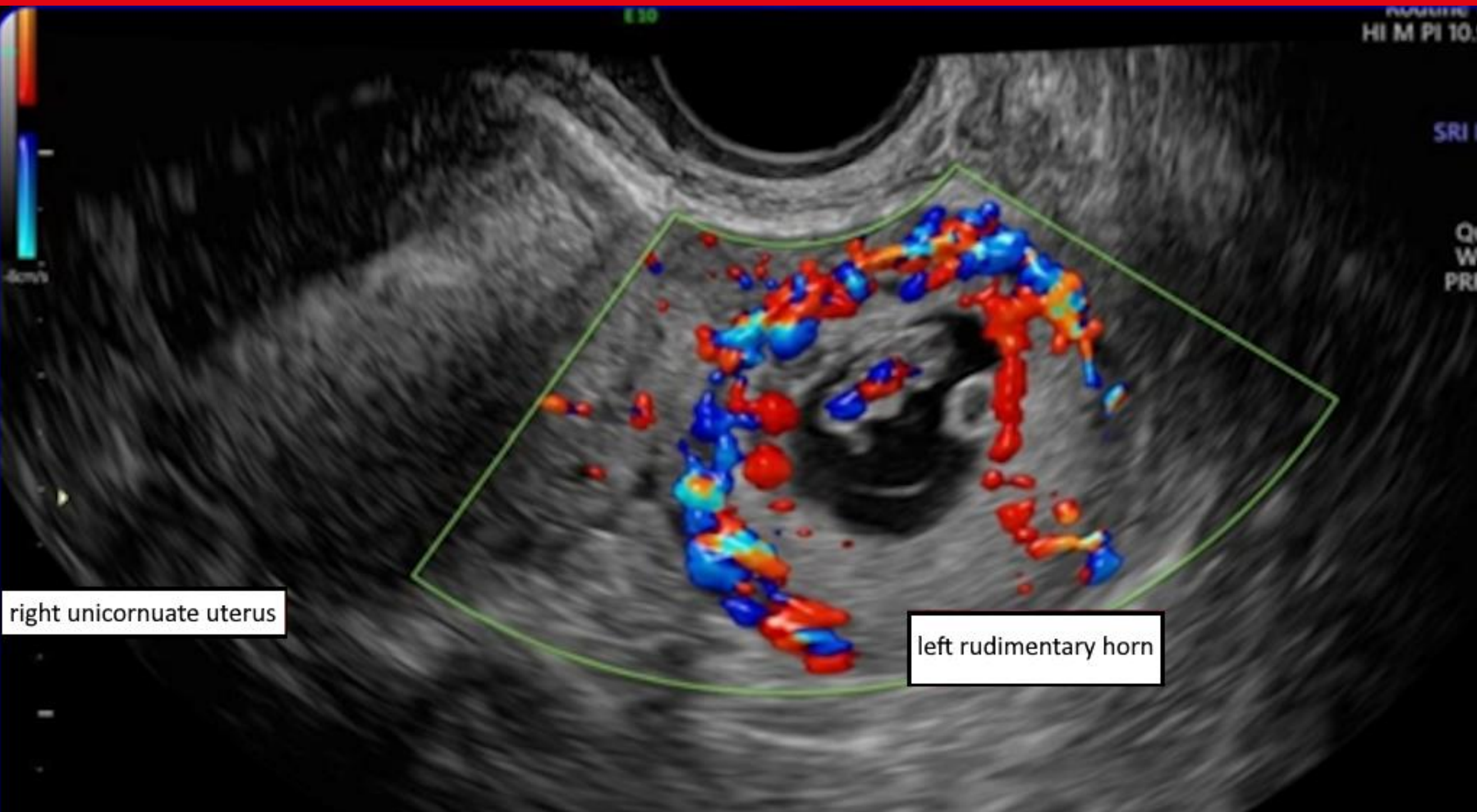


Figure 1. Transvaginal ultrasound demonstrating a left rudimentary horn pregnancy.



Figure 2. 3D ultrasound confirming a left rudimentary horn pregnancy

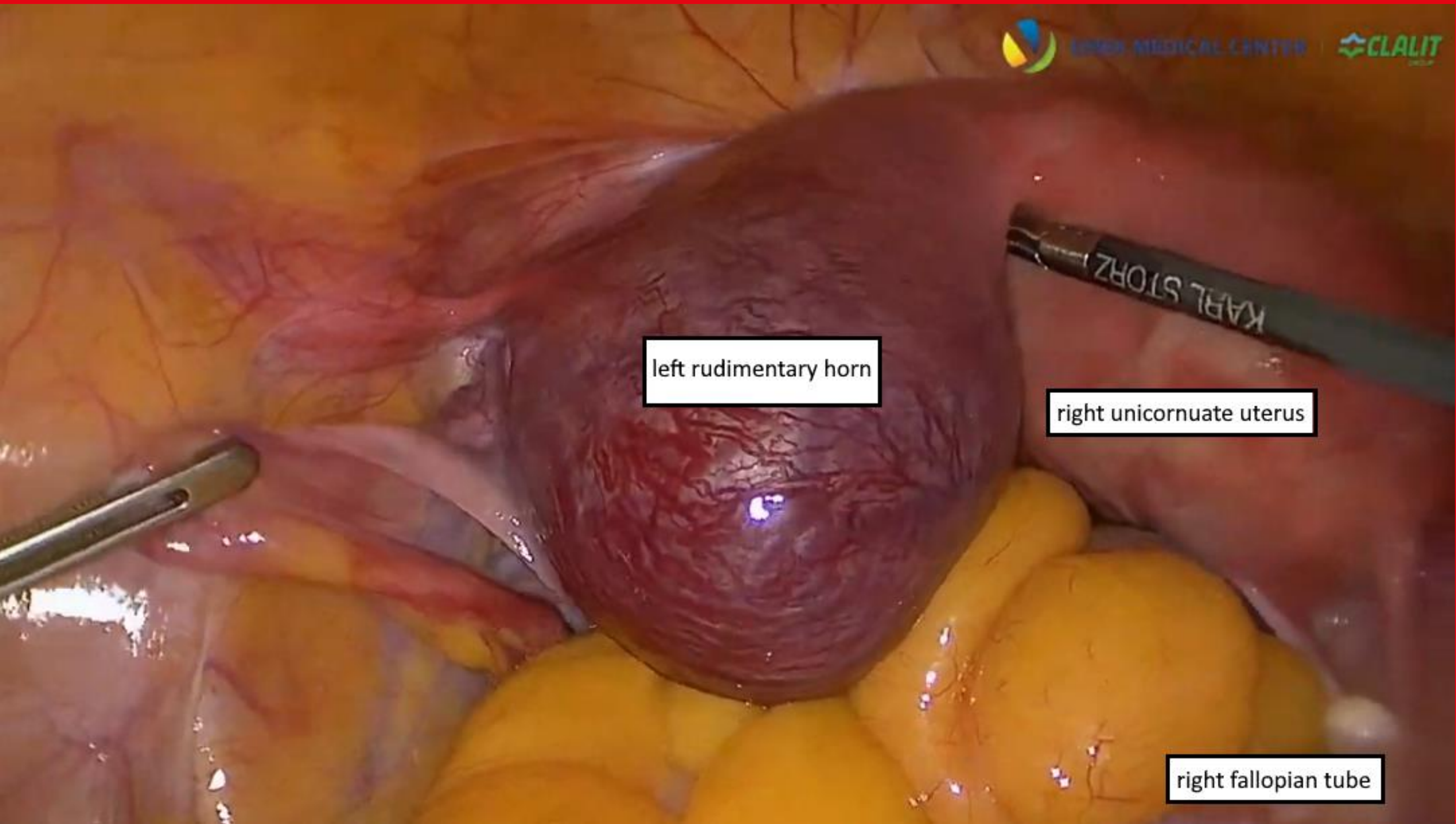


Figure 3. Laparoscopic confirmation of the sonographic diagnosis