



Ectopic pregnancies in unusual locations

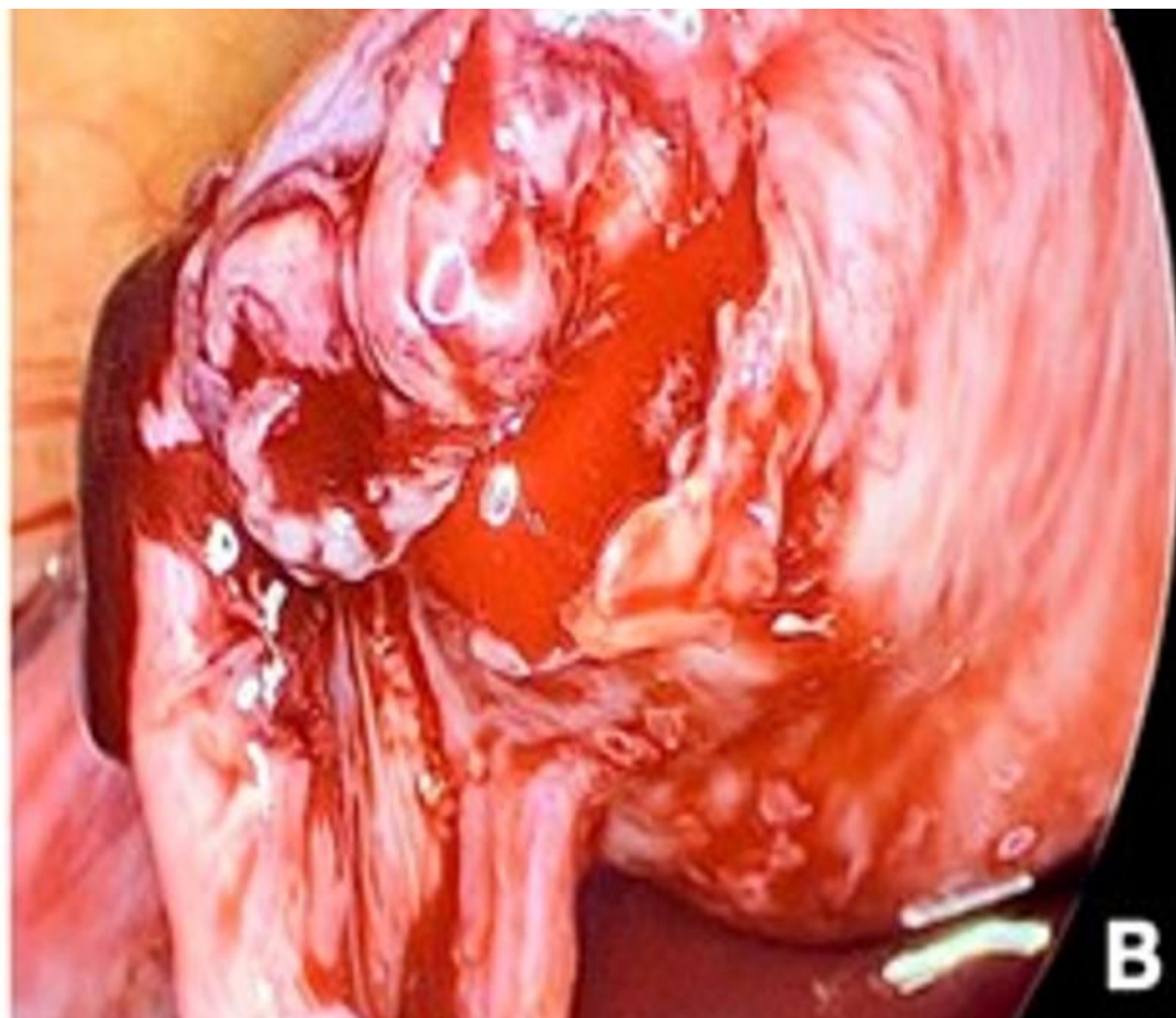
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Introduction

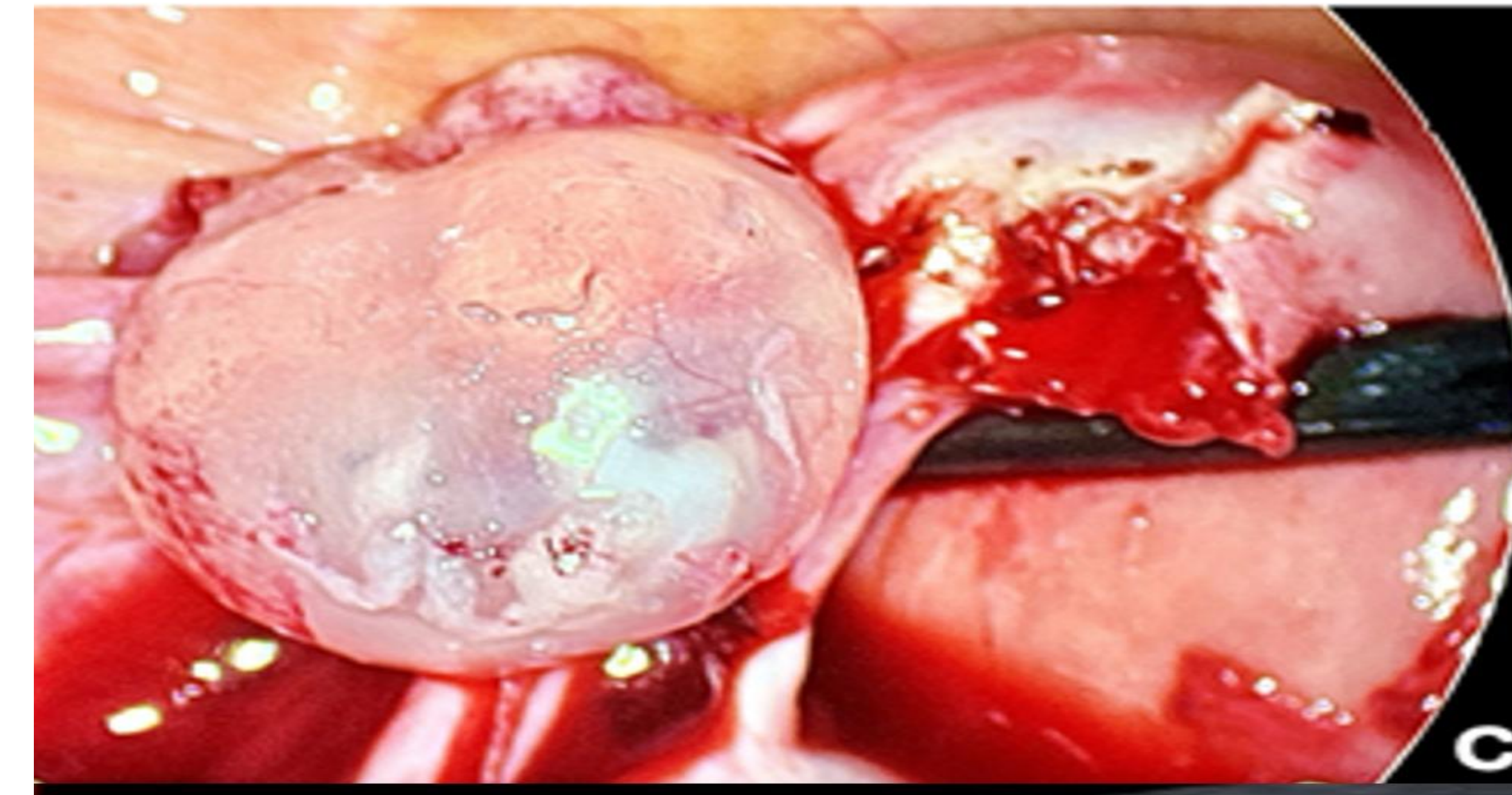
An ectopic pregnancy occurs when fetal tissue implants outside of the uterus or attaches to an abnormal or scarred portion of the uterus. Two cases of ectopic pregnancy are reported.

Case report 1

A 29-year-old female patient was admitted with hemodynamic instability and abrupt onset of abdominal pain. She reported amenorrhea of 6 weeks but denied being pregnant. Transvaginal ultrasound showed hemoperitoneum and no image compatible with intrauterine or extrauterine pregnancy. Exploratory laparoscopy was performed. Hemoperitoneum and active bleeding from the left uterine cornua (Figures A, B) was observed and sutured.

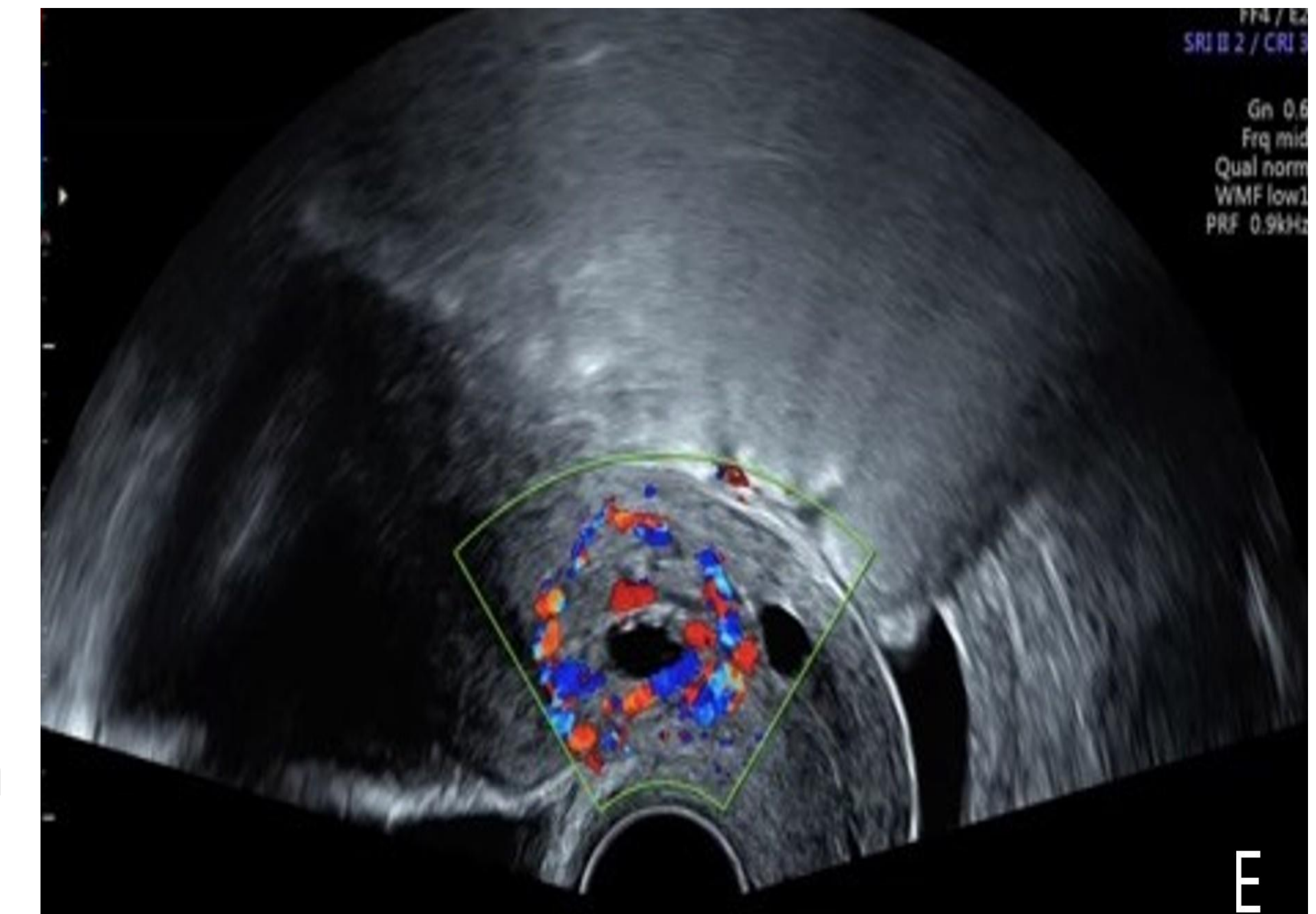


A gestational sac with embryo inside was found unattached in the peritoneal cavity (Figures C,D) confirming the diagnosis of accidental cornual gestation.



Case report 2

A 6 weeks pregnant women consulted because of vaginal bleeding. In the ultrasound exam no image of intrauterine pregnancy was found but an image of yolk sac was seen located at the cervix (figure E). Multiple-dose methotrexate treatment was administrated. BHCG was carried out weekly and it became negative in the fourth week.



Conclusion

Non-tubaric ectopic pregnancy is a diagnostic and therapeutic challenge. The characteristic clinical triad (amenorrhea, abdominal pain and vaginal bleeding) is present in only 40% of cases. Usually they manifest at a more advanced stage of gestation and with a greater likelihood of complications. In early stages management can be non-invasive with methotrexate. However, frequently the diagnosis is more advanced and therefore requires surgical treatment.