



Laparoscopic management of interstitial ectopic coexistent with a fibroid: A cause or a chance?

Akshita Panwar

Paras Hospitals, Gurugram, India

Abstract

BACKGROUND: Interstitial ectopic constitutes 1-2% of all ectopic gestations but carries seven times more mortality than others. It has the propensity to cause massive hemorrhage at any time in early pregnancy, making early recognition and treatment crucial.

CASE: We present a case of right-sided interstitial ectopic in a 41 year old parous lady harbouring pan mural calcified fibroid in close proximity to the ectopic pregnancy who was desirous of future fertility.

RESULTS: Laparoscopic linear cornuostomy followed by right salpingectomy and myomectomy was performed. Various etiologies have been described in the literature including a previous ectopic, in-vitro fertilization, pelvic inflammatory disease, and previous ipsilateral salpingectomy but in our case presence of pan mural fibroid in close proximity to tubal ostium might be the plausible cause for interstitial ectopic.

CONCLUSIONS: Laparoscopic cornuostomy with salpingectomy and concurrent myomectomy is a safe and feasible option considering the desire for future fertility and lower risk of uterine rupture compared to cornuectomy.

Biography

Akshita Panwar is from the Department of Minimally Invasive Gynaecology at Paras Hospitals in Gurugram, India.

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