

# A Clinical Study on Ectopic Pregnancy

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## Abstract

**Background:** Ectopic pregnancy is defined as when gestational sac implants itself outside the uterine cavity in the fallopian tubes, ovary, cervix, and peritoneum. Ectopic pregnancy is one of the commonest acute abdominal emergencies a gynaecologist has to meet in his day to day practice. It is also a matter of great concern that a woman might have to face any time during her childbearing period. It not only threatens the life if not treated timely and effectively but also tells upon her future fertility unavoidably by causing mutilation of an essential organ of reproduction, namely the fallopian tube with or without ovary and sometimes even the uterus.

**Methods:** This prospective observational study was conducted by the Department of OBG at KMCT medical college and research institute from November 2018 to October 2019. A total of 30 patients were included in the study. A comprehensive history taken from each patient followed by a thorough physical examination and were recorded in the pre-designed profoma and analyzed.

**Results:** The maximum 16 (53.3%) were in the age group of 26-30 years followed by 7 (23.3%) from the age group 20-25 years. The mean age of the patients was 26.62 (SD14.66) years ranging from 20 to 40 yrs. The typical triad of amenorrhoea, pain abdomen and bleeding was observed in majority of the cases. Amenorrhoea and Abdominal pain were the most significant symptoms present in 100% and 93.3% of the cases. Bleeding was present in 24 (80%) cases.

**Keywords:** Ectopic pregnancy; Salpingectomy; Fallopian tube.

## Introduction

Ectopic pregnancy is defined as when gestational sac implants itself outside the uterine cavity in the fallopian tubes, ovary, cervix, and peritoneum.<sup>1</sup> Ectopic pregnancy is one of the commonest acute abdominal emergencies a gynaecologist has to meet in his day to day practice. The word ectopic is from Greek; 'EX' and 'TOPOS' meaning "out of place".<sup>2</sup> It is defined as any intra or extra uterine gestation in which the fertilized ovum implants at an aberrant site inconducive to growth and development. It is also a matter of great concern that a woman might have to face any time during her childbearing period. It not only threatens the life if not treated timely and effectively but also tells upon her future fertility unavoidably by causing mutilation of an essential organ of reproduction, namely the fallopian tube with or without ovary and sometimes even the uterus. In developing countries a majority of hospital based studies have reported ectopic pregnancy case fatality rate 1-3%, which is 10 times higher to that of reported in developed countries.<sup>3</sup> Therefore, this study aimed to assess various parameters associated with ectopic pregnancy for better understanding of condition which will help us in early diagnosis and timely intervention and help decrease mortality and morbidity associated with it.

## Materials and Methods

### Source of Data

This prospective observational study was conducted by the Department of OBG at KMCT medical college and research institute from November 2018 to October 2019. A total of 30 patients were included in the study on the basis of inclusion criteria. A detailed history and

### Inclusion Criteria

All diagnosed cases of ectopic pregnancy admitted to hospital during the study period.

### Exclusion Criteria

All intrauterine pregnancies and sonologically diagnosed to mass (acute abdomen).

### Procedure

The detailed history and proper clinical findings were entered in a proforma case sheet. The clinical examination was done and necessary investigations were carried out to establish the diagnosis. On admission, after a detailed examination, a sample of blood was drawn for

grouping and cross-matching to arrange blood transfusion and patients in shock were treated and then taken for surgery.

### Statistical Analysis

The data was analyzed using SPSS software version 16. Descriptive statistics like mean and percentages were used to interpret the results.

## Results

The results of clinical study of 30 cases of ectopic pregnancy studied at our hospital during the period of November 2018 to October 2019.

**Table 1:** Ectopic Pregnancy in Relation to Age.

Age	No of Patients	Percentage
20-25	7	23.3%
26-30	16	53.3%
31-35	5	16.6%
36-40	2	6.8%
Total	30	100

Out of 30 subjects enrolled into the study, maximum 16 (53.3%) were in the age group of 26-30 years followed by 7 (23.3%) from the age group 20-25 years. The mean age of the patients was 26.62 (SD14.66) years ranging from 20 to 40 yrs (Table 1).

**Table 2:** Distribution of Cases Based on Parity.

Parity	No of Patients	Percentage
Nulliparous	0	0
1	4	13.2%
2	3	10%
3	9	30%
4	12	40%
5	2	6.8%
Total	30	100

When review of previous reproductive performance was studied, it was found that the maximum incidence of ectopic gestation (70%) occurred among the third and fourth gravida (Table 2).

**Table 3:** Mode of Presentation.

Presentation	No of Patients	Percentage
Amenorrhoea	30	100%
Abdominal Pain	28	93.3%
Bleeding	24	80%
Fainting	20	66.7%
Vomiting	20	66.7%

The typical triad of amenorrhoea, pain abdomen and bleeding was observed in majority of the cases. Amenorrhoea and Abdominal pain were the most significant symptoms present in 100% and 93.3% of the cases. Bleeding was present in 24 (80%) cases (Table 3).

**Table 4:** Site of Ectopic Pregnancy.

Site	No of Patients	Percentage
Ampulla	22	73.2%
Isthmus	4	13.2%
Infundibulum	2	6.8%
Interstitial	2	6.8%
Total	30	100

On surgery 22 cases (73.2%) were found to be ampullary and four cases were isthmus (13.2%). The remaining two cases each were interstitial and infundibulum. 19 cases had pathology in the left side and in 11 cases the pathology was on the right side (Table 4).

**Table 5:** Distribution According to Laparotomy Procedure.

Laparotomy Procedure	No of Patients	Percentage
Left Salpingectomy	15	50%
Right Salpingectomy	11	36.4%
Left Salpingo Oophorectomy	2	6.8%
Left Salpingectomy+ Check Curretage	2	6.8%
Total	30	100

Out of the 30 cases who went laparotomy, 15 cases (50%) underwent left salpingectomy and 11 cases (36.4%) underwent right salpingectomy. Other procedures performed were 2 case (6.8%) of left salpingo-oophorectomy and two case (6.8%) underwent left salpingectomy with check curettage (Table 5).

## Discussion

Ectopic pregnancy may occur at any age from menarche to menopause. Age groups of the present study shown that age range of 20-30 years (76.6%) were at higher risk group. The results are in accordance with Panchal D et. al.<sup>4</sup> and Gaddagi RA et. al.<sup>5</sup> who noted that 71.66% and 70.2 % of patients belonged to the same age group. Majority of women with ectopic pregnancy were multi gravida (86.8%). This correlates with the studies done by Shetty S et. al.<sup>6</sup> (83.9%) Panchal D et. al.<sup>4</sup> (81.66%) and Poonam et. al.<sup>7</sup> (83.6). The higher incidence in multigravida is probably due to previous miscarriages and infection resulting in tubal damage. The clinical picture is dependent on several factors mostly the extent of time taken for disturbance to occur in ectopic gestation. The more extensive and rapid the disturbance, the clearer is the clinical picture. Hence, undisturbed ectopic gestation is likely to be missed in majority of the cases as the clinical features are vague. Amenorrhoea was present in 100% of cases in our study which was in accordance with the study done by Rose et. al.<sup>8</sup>. Ampullary pregnancy on surgery was found in 73.1% cases which was consistent with the study done by Savitha DY et. al.<sup>9</sup> who reported it to be 61.53%.

## Conclusion

From this study, we can conclude ectopic pregnancy remains a gynecological catastrophe in countries and a major challenge. It is necessary to devise means of early detection and treatment which plays an important role in reducing the mortality associated with ectopic pregnancy. The

treatment modality also has evolved from radical to conservative surgery and even to medical and expectant management. It is therefore important that all the physicians should be sensitive to the fact that in the reproductive age group any women presenting with pain in the lower abdomen, diagnosis of ectopic pregnancy should be entertained (High index of suspicion for ectopic pregnancy) irrespective of the presence or absence of amenorrhoea, whether or not she has undergone sterilization.

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**Conflict of interest:** None declared

**Ethical approval:** The study was approved by the Institutional Ethics Committee.

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