

Introduction

- Ectopic pregnancy in a caesarean (CS) scar is uncommon (6% of ectopic pregnancies), but potentially life-threatening as it can cause rupture and haemorrhage.
- Heterotopic pregnancy is a type of multiple gestation whereby one fetus is intrauterine (IUP) and the other is ectopic (~ 1/30,000 pregnancies³.)
- This case reports an extremely rare combination of these two conditions – a heterotopic CS scar ectopic pregnancy.
- Due to the rarity of this condition, there is no consensus on preferred management.
- Treatment is particularly complex when preservation of IUP is desired. The patient is usually offered selective embryo reduction using TVS-guided KCl injection and/or suction aspiration of the CS ectopic pregnancy⁴.
- Other treatment options include laparoscopy, hysteroscopy, laparotomy, or expectant management^{5,6}.

Case Description (Part 1)

- 37-year-old female, G4P2, pregnant with DCDA twins (spontaneous conception).
- Previous forceps delivery (2016), then elective CS for breech presentation (2019).
- Dating scan revealed that Twin A was intrauterine and Twin B had demised in the patient's previous CS scar.
- Patient was asymptomatic.
- Obstetrician recommended termination of the IUP and definitive management of the CS ectopic due to risk of life-threatening rupture and haemorrhage.
- Patient strongly desired preservation of IUP and sought 2nd opinion.
- Opted for conservative management with close monitoring and regular ultrasounds, understanding the likelihood of life-saving hysterectomy at time of delivery.
- Further complicating the pregnancy was a major placenta praevia.

Ultrasound Images



Case Description (Part 2)

- Presented to hospital at 33+2 weeks gestation with unprovoked APH.
- Fluid filled sac at CS scar was stable on bedside US, CTG normal and bleeding settled spontaneously.
- Classical CS, total hysterectomy, and bilateral salpingectomy performed the next day with delivery of live female infant.
- Estimated blood loss 4.5L requiring 4 units of packed red blood cells.
- Patient made good post-operative recovery.

Discussion

This case reports an extremely rare event of heterotopic caesarean scar ectopic pregnancy that was managed conservatively. The case suggests that continuation of the pregnancy can result in a live birth, acknowledging the significant blood loss and need for hysterectomy.

3. Chong, Y., et al. (2022). Ultrasound for monitoring twin caesarean scar pregnancy following feticide. *Journal of international medical research*

4. Ouyang, Y., et al. (2021). Heterotopic Caesarean Scar Pregnancy: An Analysis of 20 Cases Following in vitro Fertilization-Embryo Transfer. *J Ultrasound Med,*

5. Bringley, D & Rijhsinghani, A. (2016). Twin Caesarean Scar Ectopic Pregnancy Treated with Systemic and Local Methotrexate. *American Journal of Obstetrics and Gynecology,* 216,

6. Krispin, E., et al. (2022). Surgical management of first-trimester heterotopic dichorionic diamniotic Caesarean scar pregnancy. *Ultrasound in obstetrics & gynecology,* 59(6), 823-824.