NAVIGATING THE COMPLEXITIES OF HETEROTOPIC Pregnancy: Diagnostic Challenges, Management Strategies, and Patient Counselling - A case report

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INTRODUCTION

Heterotopic pregnancies present unique complexities and challenges in diagnosis, counselling and management of patients. We present a case report of a 35-year-old nulliparous woman diagnosed with a heterotopic pregnancy comprising a live intrauterine pregnancy and a stable right interstitial pregnancy, who opted for conservative management.



CASE SUMMARY

The patient, gravida 1, para 0, presented with mild lower pelvic discomfort and vomiting at 7+1 weeks gestation. Ultrasound revealed a viable intrauterine pregnancy and a suspicious right interstitial pregnancy. She was counselled on management options including conservative surveillance, medical intervention with methotrexate, or surgical excision, and opted for conservative management to preserve the intrauterine pregnancy.



- 1. **Diagnostic challenges:** Initial symptoms can be ambiguous and overlap with normal early pregnancy symptoms, complicating timely diagnosis.
- 2. Case-Specific Insights: The patient presented with mild lower pelvic discomfort and vomiting,

which were not initially indicative of a heterotopic pregnancy. Ultrasound was critical in identifying the live intrauterine pregnancy and the suspicious right interstitial pregnancy.



MORE KEY FINDINGS

3. Management Strategies: Conservative management was chosen to preserve the intrauterine pregnancy, involving vigilant monitoring without immediate surgical or medical intervention. This approach was successful in maintaining the intrauterine pregnancy past the first trimester without the ectopic pregnancy requiring surgical intervention thus far.

4. **Counselling Approaches:** Comprehensive counselling was provided to inform the patient of all management options, including conservative management, methotrexate administration, and surgical excision. The patient's informed choice for conservative management highlights the importance of individualised care and patient autonomy.



LEARNING POINTS

- 1. Importance of early and accurate diagnosis
- 2. Balancing management risks
- 3. Patient centred counselling
- 4. Need for further research

