

# Cervical Ectopic Pregnancy: A Case of Acute Haemorrhage Requiring Emergency Surgical Management

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Health  
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*Transvaginal ultrasound image demonstrating a gestational sac within the lower cervical canal. Differentials include cervical ectopic pregnancy and imminent miscarriage.*

## BACKGROUND

Cervical ectopic pregnancy (CEP) is a rare but potentially life-threatening condition where implantation occurs in the endocervical canal. It carries a high risk of severe haemorrhage and hysterectomy. Diagnosis can be challenging, and there is no standardised management pathway.

## CASE

35-year-old nulliparous woman referred with suspected CEP on ultrasound, with a gestational sac in the cervical canal, bradycardic fetal heartbeat but no stromal invasion or increased vascularity. Differential included imminent miscarriage. On admission, she was haemodynamically stable with mild vaginal bleeding. Overnight, she developed severe pain and heavy bleeding estimated 1L.

## RESULTS

She underwent emergency evacuation using polypectomy forceps and suction curettage. Intraoperative EBL was 1.5L, requiring transfusion of one unit of packed red blood cells. Postoperatively, she received an additional unit for symptomatic anaemia and discharged on day 8.

## DISCUSSION

This case highlights the importance of early diagnosis and individualised management of CEP to minimise haemorrhage risk and avoid hysterectomy. Preoperative planning and patient optimisation are crucial for improving outcomes.