A case report of missed abortion in cervical pregnancy

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Abstract

Naturally, blastocyst implants in the uterine cavity. Implantation of blastocyst in any other place is considered an ectopic pregnancy, which is in more than 95% a tubal pregnancy. Cervical ectopic pregnancy is a rare type of ectopic pregnancy in which blastocyst is implanted in the cervical canal. Therefore due to serious risks of cervical pregnancy, all obstetricians facing first-trimester vaginal bleedings should consider it as a differential diagnosis. In this article a case report of missed cervical pregnancy in a 32-year old woman is presented. The patient complained of temporary vaginal bleeding during the last 25 weeks. Sonography had been performed twice; the first one in the 12\textsuperscript{th} week of gestation showing no fetal echo and the second in 22\textsuperscript{nd} week of gestation showing a 27×12 mm mass and fluid in the endometrium. With the diagnosis of missed abortion suction curettage was performed at 25\textsuperscript{th} week of gestation and it was lead to laparatomy due to active hemorrhage and clinical picture of deterioration of vital signs. During laparatomy, a dilated cervix completely invaded by trophoblasts was observed. Hysterectomy was performed with ovarian preservation as a final management. Pathologic findings showed complete implantation of placenta in the end cervix.

Keywords: Ectopic Pregnancy, Cervical pregnancy, Missed abortion, and Hysterectomy.

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