

## CORNUAL ECTOPIC PREGNANCY – A RARE ENTITY



### INTRODUCTION

- Cornual ectopic pregnancy, a rare type of ectopic pregnancy, accounts for about 2% of cases.
- It occurs when a gestational sac implants in the upper lateral uterine segment near the tubal interstitial zone.
- Due to its vascularity, cornual pregnancy carries a higher risk of rupture and severe hemorrhage compared to other ectopic pregnancies.
- Early diagnosis using transvaginal ultrasound and beta-hCG levels is vital to prevent complications

### CLINICAL PRESENTATION

A 27 years female , G3P1L1A1 at 12 weeks of gestation was referred from SDH Sillod i/v/o Right Sided ectopic pregnancy.

#### Chief Complaints:

**Bleeding per vaginum:** Since 1.5 months

**Abdominal pain:** Present for 3 days, not relieved by medications

#### Obstetric History:

**G1:** Full-term normal delivery (FTND) at a Medical College Hospital (MCH), 1.5 years ago, live birth (L1).

**G2:** Spontaneous abortion at 3 months gestational age, 1 year ago.

**G3:** Current pregnancy.

### CLINICAL FINDINGS

**Pulse Rate (PR):** 120/min  
**Blood Pressure (BP):** 100/64 mmHg

#### General Examination:

**Pallor:** Present

#### Abdominal Examination (P/A):

Abdomen soft and tender

#### Per Vaginal Examination (P/V):

Uterus: Normal size

Tenderness: Present in the right adnexa

#### Ultrasound Findings (USG TVS):

Suggestive of right-sided ectopic pregnancy with hemoperitoneum.



### MANAGEMENT

- The patient was taken for emergency explorative laparotomy in spinal anesthesia
- There was **intraoperative evidence of ruptured right cornual pregnancy with 200 ml hemoperitoneum.**
- Left sided Fallopian tube and Ovary found to be normal.
- **Right sided ectopic resection with partial salpingectomy was done.**



### DISCUSSION

- In this case, the patient presented with abdominal pain, vaginal bleeding, and hemodynamic instability, which are hallmark symptoms of an advanced ectopic pregnancy.
- Delayed recognition of cornual ectopic pregnancies can lead to uterine rupture, catastrophic hemorrhage, and increased maternal morbidity and mortality.
- TVS often reveals an empty uterine cavity, a gestational sac located eccentrically, and a thin myometrial layer surrounding the sac.

### CONCLUSION

- Cornual pregnancy is a potential life-threatening condition which needs early detection and management.
- Minimally invasive techniques have advanced significantly, becoming safer and easier to adopt. However, in emergencies, especially with hemodynamically unstable patients, the laparotomic approach remains a reliable choice.
- Medical management must be considered **whenever possible.**

1) Hoang BT, Whitaker DW. Ruptured Left Cornual Ectopic Pregnancy: A Case Report. Cureus. 2023 Jul 6;15(7):e41449. doi: 10.7759/cureus.41449. PMID: 37546046; PMCID: PMC10404111.  
 2) Varun N, Nigam A, Elahi AA, et al. Cornual ectopic pregnancy: laparoscopic management step by step. Case Reports. 2018;2018:bcr-2017-223998.  
 3) Bansal, P., Aggarwal, G., & Bansal, I. (2021). A rare case report of cornual pregnancy. International Journal of Reproduction, Contraception, Obstetrics and Gynecology, 10(10), 3986–3988. <https://doi.org/10.18203/2320-1770.ijrcog20213876>