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Title: A CASE OF RUPTURED OVARIAN ECTOPIC PREGNANCY



**INTRODUCTION**-Ovarian ectopic pregnancy is a rare type of nontubal ectopic pregnancy having a incidence of 0.5 - 3% in all ectopic pregnancies. Risk factors are pelvic inflammatory disease, IUCD,pelvicsurgeries, ,abortions , endometriosis, tubal sterilization, tubal surgery, ART, previous ectopics. The diagnosis is based on clinical , surgical and histopathological observation. \*SPIEGELBERG'S CRITERIA:-Intact fallopian tube on affected side.The fetal sac occupies position of the affected ovary . Affected ovary is connected to uterus by ovarian ligament. Ovarian tissue located in sac wall.

**AIMS AND OBJECTIVES**-Aim is to provide comprehensive overview of ruptured ovarian ectopic pregnancy and ultimately improving the care provided to patient with this condition .

**CASE REPORT**-Presenting a case of rupture ovarian ectopic pregnancy . A 28 years old G4P2L2A1 with 2prevlscs with Lcb – 2 yrs Came to labour room with severe lower abdominal pain with bleeding per vagina since early morning. Her last menstrual period occurred 2 months ago, and the patient has no previous history of any medical conditions .On examination patient is hemodynamically stable and on per abdominal examination tenderness present over the right iliac fossa. On gentle pervaginal examination right fornicial fullness and tenderness present. The UPT test at hospital came back positive. For further evaluation ,an ultrasound performed and it revealed normal size uterus with no gestational sac,echogenic mass in the ovary, free fluid in pouch of Douglas suggestive of ovarian ectopic pregnancy.

**MANAGEMENT**-In view of rupture ovarian ectopic pregnancy emergency laparotomy with salpingoophorectomy was performed on affected side with tubectomy on other side.During surgery 400cc of hemoperitoneum noticed. Patient recovered well .Histopathological examination confirmed the ovarian ectopic pregnancy.

**DISCUSSION**-An ectopic pregnancy characterized by implantation and development of an embryo out side the uterine cavity. Ectopic pregnancy can occur in ovaries (0.5-3%) IUCD , pelvic surgeries are the risk factors. Patient presents with severe abdominal pain. Diagnosis based on ultrasound and histopathological specimen ,although ultrasound may suggest the diagnosis surgery remains the best method of differential diagnosis and management.

**CONCLUSION**-This case highlights the importance of raising awareness about ovarian ectopic pregnancy, rare but potentially life threatening condition.

The incidence of ovarian ectopic pregnancy is to increasing due to the rising use of IUCD , pelvic and abdominal surgeries.

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