



Ultrasound Guided Intrasac Methotrexate Instillation for Live Cesarean Scar Ectopic Pregnancy

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Received: 3 August 2020 / Accepted: 28 October 2020 / Published online: 5 December 2020
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Abstract A 38-year-old G5P2 with previous 2LSCS, 2D&Cs and hysteroscopic myomectomy presented with a live Cesarean scar ectopic of 7 weeks gestation. Transabdominal ultrasound-guided intrasac potassium chloride and methotrexate instillation was performed under local anesthesia leading to a successful resolution of the ectopic pregnancy.

Keywords Cesarean scar pregnancy · Ectopic pregnancy · Methotrexate · Minimally invasive

diameter was 29 mm and crown to rump length was 14.8 mm both corresponding to 7 weeks and 5 days. Fetal heart rate measured 148 beats per minute. Transabdominal ultrasound-guided intrasac potassium chloride (KCL) and methotrexate instillation was performed under local anesthesia in the same sitting (Fig. 1c,d). Preprocedure beta-hCG of 1,65,000mIU/mL decreased to < 5mIU/mL over 5 weeks. Ultrasound findings took 16 weeks to resolve completely (Fig. 1e,f).

Case Summary

A 38-year-old G5P2 with previous 2LSCS, 2D&Cs and hysteroscopic myomectomy presented with a live Cesarean scar ectopic pregnancy (CSEP) with measurements corresponding to 7 weeks' gestation (Fig. 1a,b). Gestational sac

Electronic supplementary material The online version of this article (<https://doi.org/10.1007/s40556-020-00274-3>) contains supplementary material, which is available to authorized users.

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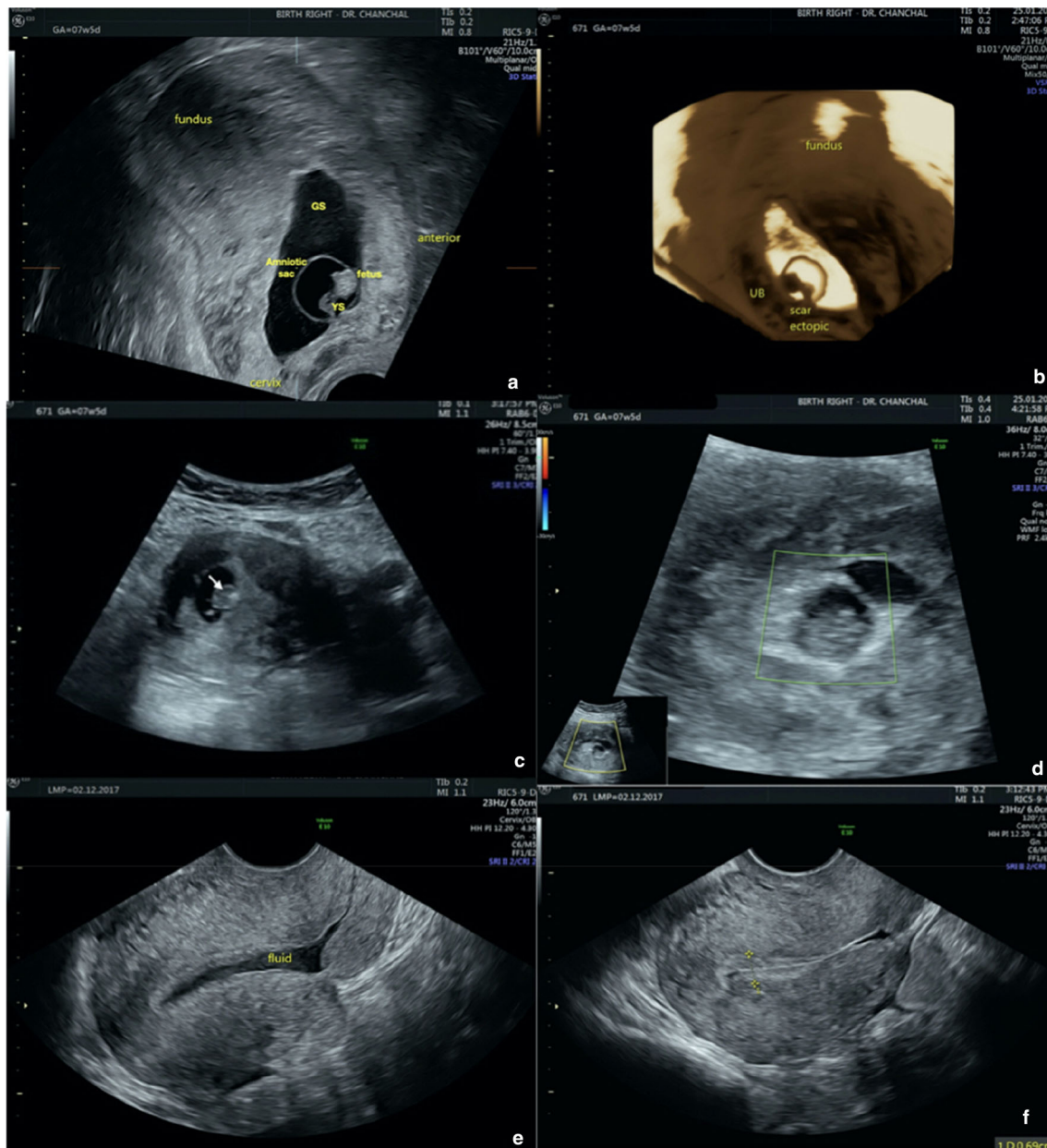


Figure 1 a 3D and b: 3D rendered (inversion mode) images on transvaginal ultrasound showing cesarean scar ectopic pregnancy implanted within the previous scar and an empty fundus. GS: gestational sac, YS: yolk sac, UB: urinary bladder c: Ultrasound guided intrasac methotrexate instillation into the CSEP (arrowhead

pointing to needle tip) d: Post-procedure colour Doppler showing collapsed gestational sac with no cardiac activity e, f: 2D ultrasound images at 10- and 16-weeks post-procedure showing complete resolution of the CSEP

Compliance with Ethical Standards

Conflict of interest The authors do not declare any conflict of interest.

Ethical Approval Confidentiality of the patient has been maintained and written informed consent has been taken to publish the images.

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