

## Clinical Profile of Ectopic Pregnancy

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### Abstract

**Background:** A ruptured ectopic pregnancy is a true emergency and remains the leading cause of pregnancy related first trimester deaths.

**Methods:** Hospital based Retrospective study conducted on women who presented to our hospital with ectopic pregnancy were analysed from the available hospital documents (bedside records, history, operation theatre records and yearly audit report).

**Results:** The mean age -  $27 \pm 3$  years. The majority of patients (47.36%) were within the age group 25–29 years. A significant proportion (53%) of these were multiparous, while only 26.31% were nulliparous. Majority of the patients had amenorrhea of  $\leq 7$  weeks. The commonest site of ectopic gestation was the ampullary region while the tubo-ovarian site had the lowest occurrence.

**Conclusions:** Ectopic pregnancy remains a gynecological emergency in developing countries and a major challenge to the reproductive performance of women worldwide, it should be considered a relevant public health issue in India

**Keywords:** Ectopic, Pregnancy, Amenorrhoea.

### Introduction

Ectopic pregnancy means the presence of pregnancy outside the normal uterine cavity. It is an important cause of maternal mortality in the first trimester worldwide and also in our country. The overall incidence of ectopic pregnancy is increasing in the past three decades but due to early diagnosis and management, the case fatality rate has come down. In spite of good diagnostic methods available most women present late as majority of the cases are asymptomatic till they rupture. Ectopic pregnancy commonly occurs in the fallopian tube (95 %)<sup>1</sup>. Most likely cause of ectopic pregnancy is the delay in the passage of the fertilized ovum from the fallopian tube to the uterine cavity<sup>1</sup>. The associated risk factors are sexually transmitted diseases, pelvic inflammatory disease, and history of previous

ectopic, tubal sterilization, intra uterine device usage and age  $> 35$  yrs<sup>2,3,4</sup>. Diagnosis can be made by USG, serum  $\beta$ hCG, although the 'gold standard' is laparoscopy<sup>5</sup>.

The importance of ectopic pregnancy is peculiar in our country because rather than join the global trend of early diagnosis and conservative approach in management, we are challenged by late presentation and rupture in most cases.

### Material and Method

**Study design:** Hospital based Retrospective study.

**Sample size:** All women who presented to our hospital with ectopic pregnancy were analysed from the available hospital documents (bedside

records, history, operation theatre records and yearly audit report).

### Data Collection :

These cases were traced through the registers kept in casualty, gynaecology wards and OT records. The labour register was used to determine the total number of deliveries during this period. The data on each patient was obtained from their case records kept in the medical records department. All the relevant information and data was recorded in detail in a structured proforma prepared by the investigator.

### Data Analysis:

To collect required information from eligible patients a pre-structured pre-tested Proforma will be used. For data analysis Microsoft excel and statistical software SPSS will be used and data will be analyzed with the help of frequencies, figures, proportions, measures of central tendency, appropriate statistical test .

### Results:

Over the 1 year study period, there were 3428 total deliveries, with 19 cases of ectopic pregnancies. The incidence of ectopic pregnancy -0.5%.

**Table 1: Distribution according to Age.**

Age group(years)	No. of patients	Percentage
<20 years	2	10.53
20-24 years	7	36.85
25-29 years	9	47.35
30 or more than 30 years	1	5.27
Total	19	100

The mean age -  $27 \pm 3$  years. The majority of patients (47.36%) were within the age group 25–29 years.

**Table 2: Distribution according to Parity.**

Parity	No. of patients	Percentage
0	5	26.31
1	4	21.5
2	8	42.12
3	1	5.26
>3	1	5.26
Total	19	100

A significant proportion (53%) of these were multiparous, while only 26.31% were nulliparous.

**Table 3: Distribution according to Duration of amenorrhea.**

Duration(weeks)	No. of patients	Percentage
$\leq 7$	10	52.63
8-11	9	47.37
$\geq 12$	0	0
Total	19	100

Majority of the patients had amenorrhea of  $\leq 7$  weeks.

**Table 4: Distribution according to site of ectopic pregnancy.**

site	No. of patients	Percentage
Ampulla	8	42.10
Isthmus	4	21.5
Fimbria	3	15.78
Interstitial/Cornual	2	10.52
Tubo-ovarian	2	10.52
Total	19	100

The commonest site of ectopic gestation was the ampullary region while the tubo-ovarian site had the lowest occurrence.

**Table 5: Distribution according to clinical presentation.**

clinical presentation	No. of patients	Percentage
Pain abdomen	15/19	78.94
Vaginal Bleeding	7/19	36.84
Amenorrhea	13/19	68.42
Fainting	3/19	15.78
Shock	2/19	10.52
Total	19	100

The commonest presentation was abdominal pain followed by amenorrhea, vaginal bleeding, dizziness/fainting attack and shock.

## Discussion

Ectopic pregnancy is a high risk condition, a nightmare for all gynaecologists and reproductive challenge for a patient. It is a heterogeneous disease which presents itself in a bewildering variety of anatomical, physiological and clinical expressions. There is considerable regional variation in its incidence and globally, it has been on the rise over the past three decades. Worldwide, ectopic pregnancy complicates 0.25-2.0% of all pregnancies.<sup>6</sup> The incidence of ectopic pregnancy in our study is 0.5%. It correlates well with other studies.<sup>7,8</sup>

More cases were seen between age group 26-30 years. There are different studies with similar results<sup>6,9,10</sup>.

Our study showed that more than 50% had previous pregnancy. Some studies are showing increased risk of ectopic pregnancy in nulliparous or primiparous which is conflicting with our results.<sup>11</sup> Others have reported similar figures<sup>8</sup>.

The ampulla being commonly affected (42.10%) in our study correlating with other studies.<sup>11,13</sup> Ovarian pregnancies are very rare.

## Conclusions

Ectopic pregnancy remains a gynecological emergency in developing countries and a major challenge to the reproductive performance of women worldwide, it should be considered a relevant public health issue in India

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