Bilateral Ruptured Ectopic Pregnancies with Massive Hemo-Peritonium: A Case Report in a Resource-Low Setting in Sub-Saharan Africa

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Abstract

Background: Bilateral ruptured ectopic pregnancy is the rupture of two implanted product of conception outside of the uterine cavity. Bilateral ruptured ectopic pregnancy without an initial induction of ovulation is extremely rare. It’s occurrence with a major life threatening complication such as massive hemo-peritonium worsens the prognosis. Immediate diagnosis and surgical intervention is required. Few cases have been identified.

Case Report: We report the case of bilateral ruptured ectopic pregnancy with massive hemo-peritonium diagnosed in a 28-year-old female and managed at African Genesis Health Clinic Yaoundé.

Discussion and Conclusion: prompt diagnosis and surgical intervention is needed to improve the prognosis related to bilateral ruptured ectopic pregnancies with massive hemo-peritonium. Counseling for assisted means of procreation is important.

Keywords: Bilateral tubal pregnancy; Ruptured ectopic pregnancy; Massif hemo-peritonium; CMC African genesis health

Introduction

Bilateral ruptured ectopic pregnancy is the rupture of two implanted product of conception outside of the uterine cavity [1]. The incidence of simultaneous bilateral tubal pregnancies ranges from 0.63 to 1.38 per thousand [2]. The risk factors for ectopic pregnancy includes early age of sexual intercourse, increased maternal age, multiple sexual partners, pelvic infections, history of infertility, use of fertility drugs, previous ectopic pregnancies and previous pelvic surgeries [3]. This report describes the case of bilateral ruptured ectopic pregnancy with massive hemo-peritonium diagnosed in a 28-year-old female and managed at African Genesis Health Clinic Yaoundé.

Case Report

A 28-year-old female who presented with 6weeks amenorrhea, vaginal spotting and an initial left unilateral pelvic pain which subsequently become bilateral 3 days prior to consultation. The past history was relevant for chlamydia infection in 2015 for which the patient refuse treatment; multiple sexual partners; no intra-uterine device usage; extensive previous pelvic infections, history of infertility, use of fertility drugs, previous ectopic pregnancies and previous pelvic surgeries [3]. This report describes the case of bilateral ruptured ectopic pregnancy with massive hemo-peritonium diagnosed in a 28-year-old female and managed at African Genesis Health Clinic Yaoundé.

Discussion

Bilateral ruptured tubal ectopic pregnancies are a rare condition causing a high maternal mortality and morbidity. The incidence of simultaneous bilateral tubal pregnancies ranges from 0.63 to 1.38 per thousand [2]. The causes of bilateral ectopic pregnancies could be: simultaneous multiple ovulation, sequential impregnation or trans-peritoneal migration of trophoblastic cells from one extra-uterine pregnancy to the other tube. Recurrent ectopic pregnancies occur in 6% to 16% of women with previous history of ectopic pregnancy referred by

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with massive hemo-peritonium is an emergency requiring a holistic approach. Despite the uncontrolled nature of the haemorrhage on the right tube and the damage of the left tube we proceeded with a bilateral antegrade salpingectomy.

**Conclusion**

Though relatively rare, the authors describe their experience in the management of this very important cause bilateral ruptured ectopic pregnancy with massive hemo-peritonium. Prompt diagnosis and surgical intervention is needed to curb the morbidity and mortality of this disorder.

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Igwegbe, Eleje, Okpala [3] and many women, for unknown reasons, fail to conceive even after successful reconstructive tubal surgery [4,5]. The Diagnosis is clinical but ultrasound is needed to confirm the diagnosis. The management of bilateral ruptured tubal ectopic pregnancies

Figure 1: Bilateral ruptured ectopic pregnancy (A) right ruptured ectopic pregnancy at ampulla, (B) left ruptured ectopic pregnancy at fimbria.