

6th International Conference on Gynecology and Obstetrics
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13th International Conference on Alzheimer's Disease & Dementia
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28th World Nursing Education Conference
November 14-15, 2019 Paris, France

Expectant management of cesarean scar pregnancy

Timothy Immonen

SSM Health St. Anthony Hospital, USA

The primary objective of this case report was to examine the current standard of care for the treatment of CSP and to offer a different perspective on a possible new management strategy. Cesarean scar ectopic pregnancy (CSP) is a very rare form of ectopic pregnancy. However, it is becoming increasingly more frequent with the increasing number of cesarean sections performed each year. The recommended approach to treatment is therapeutic termination of pregnancy at the time of recognition. In this case report, we present a case of CSP managed expectantly ending in emergency cesarean delivery at 27 weeks' gestation. Delivery was complicated by severe postpartum hemorrhage with the need for cesarean hysterectomy. This report suggests the ability to expectantly manage appropriate cesarean scar ectopic pregnancies. The case report follows the course of pregnancy managed between two different facilities and two different offices. There is one primary subject for the entirety of the case report. The patient presented to the obstetrical triage unit at 27 weeks and 4 days gestation for vaginal bleeding and delivered secondary to category II fetal heart tones unresolved with maternal resuscitative measures. The Maternal Fetal Medicine team performed a classical cesarean section. Neonate was delivered without difficulty with APGARs of 2/6/8 at 1, 5 and 10 minutes respectively. The fetus' weight was 780g at time of delivery. Thus, proving that expectant management of appropriate CSPs is a viable treatment option. It can be concluded, based on the grade of cesarean scar ectopic pregnancy, some may be a candidate for expectant management with appropriate counseling.

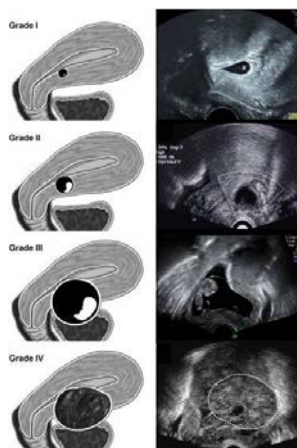


Figure 1: Cesarean scar ectopic pregnancy grading system

Recent Publications:

1. Ash A, Smith A and Maxwell D (2007) Caesarean scar pregnancy. BJOG: An International Journal of Obstetrics & Gynecology, 114:253-263.
2. Lin S Y, Hsieh C J, Tu Y A, et al. (2018) New ultrasound grading system for cesarean scar pregnancy and its implications for management strategies: An observational cohort study. PLoS One. 13(8):e0202020.

JOINT EVENT

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3. Jurkovic Davor and Wilkinson Helen (2011) Diagnosis and management of ectopic pregnancy. *BMJ* 90(1):34-40.
4. ACOG Committee on Practice Bulletins Tubal ectopic pregnancy: ACOG practice bulletin. *Clin Manage Guidelines Obstet Gynecol.* (2018) 131(3):e91-103.
5. Rotas M A, Haberman S and Levgur M (2006) Cesarean scar ectopic pregnancies: etiology, diagnosis, and management. *Obstet Gynecol.* 107(6):1373-81.

Biography

Tim Immonen is a 3rd year Obstetrics and Gynecology resident at SSM St. Anthony Hospital in Oklahoma City, Oklahoma. He is passionate about Maternal Fetal Medicine and wishes to instill change and provide a unique perspective on the field. He hopes to bring change to the field and establish himself as an innovator and a forward thinker in the Obstetric and Gynecologic realm.

Notes: