Diagnosis and Management of Ectopic Pregnancy-A Basic View Through Literature

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Abstract

Pregnancy is a period in which women carry a developing embryo in their womb. It is the period of great joy but sometimes it becomes complicated for some women. There are many complications of pregnancy one of them is an ectopic pregnancy. An ectopic pregnancy occurs when fertilized ovum implants outside the endometrial cavity. Ectopic pregnancy is a life-threatening obstetric emergency and a leading cause of maternal mortality and morbidity around the globe. Its prevalence is increasing day by day. Since ectopic pregnancy is extensive increasing trouble in the women of reproductive age. Therefore immediate effective treatment and management are required to save women from this life-threatening complication.

Keywords: Ectopic; Pregnancy; Diagnosis; Treatment; Management

Introduction

Ectopic pregnancy is when fertilized ovum implants in other tissues rather than the lining of the uterus [1]. The fallopian tube is the most common site for ectopic pregnancy. 95% of ectopic pregnancies typically occur in the fallopian tube. Other sites are ovary, cervix, and abdomen. It is an acute life-threatening event and major cause of maternal mortality mainly in the first trimester [2]. The incidence of ectopic pregnancy is increasing at an alarming rate. About 10% of all maternal deaths are due to ectopic pregnancy [1,2].

According to literature the incidence of ectopic pregnancy is about 1%-2% of all pregnancies reported in the developed world. However, it is thought that it would be much higher in the developing world but the exact statistics is unknown because in developing countries most of the cases remain unreported [1]. There was approximately six-fold multiplication in the incidence of ectopic pregnancy which is mainly due to three prominent factors: increased use of Assisted Reproductive Technology (ART), Pelvic Inflammatory Diseases (PID) and increased smoking consumption in the women of reproductive age [3].

Method

A basic literature search was done after inspiration taking from a case in the family. The words ectopic, pregnancy, diagnosis, management were in use to search the basic literature regarding this very significant topic. We came across a lot of articles from which a handful were related to our write up exploring the basic dimensions of diagnosing and treating or managing ectopic pregnancies.

Discussion

Most tubal pregnancies are caused by tubal impediment or deferred entry of the prepared ovum. The pelvic fiery ailment is the most regularly referred to the reason for disabled tubal transport and halfway tubal obstacle. Gonococcal pelvic inflammatory sickness is viewed as in charge of a vast level of cases; in any case, late investigations show that blended vigorous and anaerobic bacterial greenery because numerous tubal contamination i.e. Chlamydia, tuberculosis, and other explicit microscopic organisms are additionally involved [4]. Tubal ligation which is usually done for birth control can also lead to ectopic pregnancy as the sterilization procedure prevents intrauterine pregnancy [5]. Average pregnancy while having intrauterine devices, past history of ectopic pregnancy, smoking and multiple sex partners can also lead to ectopic pregnancy [6].

The clinical manifestation of ectopic pregnancy includes vaginal spotting in the first trimester, hurting pelvic agony and auxiliary amenorrhea may show extraterine pregnancy yet can likewise emerge in a flawless intrauterine pregnancy or as an outcome of early unsuccessful labor. Further, suggestive indications incorporate stomach torment emanating to the shoulder, stomach guarding or an intense belly, torque on uprooting of the vaginal bit of the cervix, hemodynamic unsteadiness (dyspnoea, hypotension, tachycardia) and syncope [2,6].

The diagnosis for ectopic pregnancies based on history, physical examination, and stomach paracentesis. Pregnancy tests were utilized as strong indicative examinations, with finding affirmed by transabdominal ultrasound check.

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Ultrasound is valuable in assessing patients with suspected ectopic pregnancy, basically by recording the nearness or nonattendance of an intrauterine pregnancy at an oppressive zone of around 6,500 mIU/mL of beta human chorionic gonadotropin [4].

Women with ectopic pregnancies need immediate treatment. If shock occurs immediate resuscitation with intravenous fluid and blood is required. In addition, a laparoscopic medical procedure can be utilized both for finding and treatment of unruptured ectopic pregnancy. Be that as it may, the inside needed useful symptomatic and helpful laparoscopic gear for this methodology of the board [4]. The most common surgical procedure which is lifesaving is salpingectomy [4,5].

Conclusion

Since ectopic pregnancy is an obstetric catastrophe and it greatly affects the reproductive capacity of women. It not only affects one’s reproductive health but also impacts one’s activity of daily living. Women with ectopic pregnancy can have low self-esteem and other psychological issues such as depression. However, it can be managed and treated successfully if timely identified. There is a need to introduce productive management programs to promote healthy lifestyles. Awareness session should be given to the women of reproductive age regarding risk factors, its consequences, and management. Further researches are required on the effective interventions to be taken in an acute emergency condition.

With increased prevalence, the condition is now seen common clinically but still, there are cases that are less attended in a huge setup. That is why timely check-ups are required and clinicians’ decision making and assessment skills require refreshers.

References