

Tubal Ectopic Pregnancy after Bilateral Tubal Ligation

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ABSTRACT

Tubal sterilization is an increasingly common method of contraception. Although pregnancy after sterilization is uncommon, it can occur and may be ectopic. Surprisingly, failures are not limited to the first year or two, but continued to appear even after many years during follow-up. In this paper, we report a case of ectopic pregnancy in a patient who underwent bilateral tubal ligation seven years ago for contraception.

Key words Tubal ligation, Ectopic pregnancy, Fallopian tubes.

INTRODUCTION:

Ectopic pregnancy is the most life threatening emergency in pregnancy that can lead to maternal death.¹ This complication in early pregnancy results when the fertilized ovum implants anywhere other than the endometrial lining of the uterus.² Several risk factors for ectopic pregnancy have been identified of which the most common are pelvic inflammatory disease, previous ectopic pregnancy, previous tubal surgery and the usage of intrauterine devices.³ This condition is not always considered in the differential diagnosis of pelvic pain in the childbearing age women after tubal ligation.

CASE REPORT:

A 37 year-old woman, gravida 6, para 4+1 presented with complaints of lower abdominal pain and bleeding per vaginum for 3 days and amenorrhea of 8 weeks. Seven years ago she underwent tubal sterilization at another facility in postpartum period. At presentation her pulse was 105/minute, blood pressure 90/60 mmHg and respiratory rate 15 breaths/ minute. On abdominal examination tenderness was present in lower abdomen which was also noted on bimanual pelvic examination. Her urine pregnancy test was positive. Transvaginal ultrasound showed empty uterine cavity, left sided adnexal mass and fluid in the cul-de-sac. The beta HCG was 1,467IU. A diagnosis of ruptured ectopic pregnancy was made. Emergency exploratory laparotomy was performed. On exploration left sided rupture of fallopian tube

was found (fig 1) . About 200 ml of blood was sucked out of abdomen and left salpingectomy was done. Both ovaries were normal in appearance. The post-operative course was uneventful. Histopathology report showed specimen consisted of a tubular pregnancy which contained several chorionic villi.

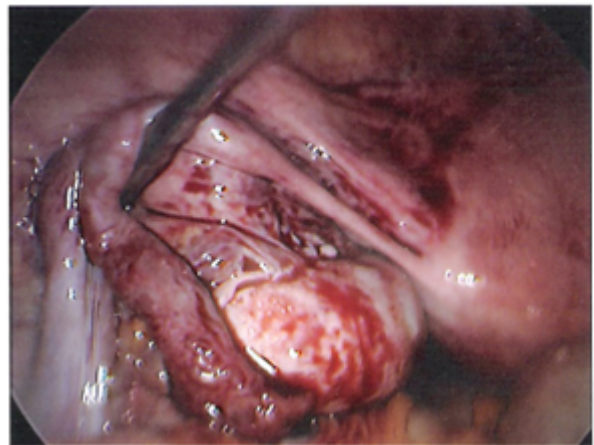


Fig 1: Tubal ectopic pregnancy

DISCUSSION:

Tubal sterilization is one of the options chosen by the women for contraception. When tubal sterilization fails, ectopic pregnancy is likely. The literature reports a 5-90% incidence of ectopic pregnancy after failed tubal sterilization.⁴ The incidence of ectopic pregnancy is higher when sterilization is performed during the postpartum period, because the edematous, friable and congested fallopian tubes following pregnancy, increases the chance of incomplete occlusion of the tubal lumen.⁵ The risk of ectopic pregnancy depends on the type of tubal sterilization. The failure rate for the Pomeroy procedure is estimated at 0.25 – 2%.⁶

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The probable explanation of these ectopic gestations after tubal ligation is recanalization or formation of a tuboperitoneal fistula. The sperms may pass through the fistula, but the fertilized ovum cannot. Implantation of fertilized ovum occurs classically in the distal tubal segment.^{4,7} In the process of recanalization there is an abnormal reconstruction of the tubal lumen with the formation of blind pouches and slit like spaces.⁵ This may result in likelihood of ectopic implantation. Fluid movement within the remaining tubal segments may influence the implantation.⁵

Females who undergo bilateral tubal ligation should be adequately counseled on the possibility of failure of this procedure for contraception.⁸ Whenever tubal sterilization is performed in conjunction with a pregnancy event such as in puerperium, extra care and meticulous technique are required to avoid failure. Ectopic pregnancy is rarely considered in the differential diagnosis of acute pelvic pain in patients after tubal ligation. It is of great importance for patients and doctors involved in the care of childbearing age women, to be aware of this complication. History of tubal ligation does not preclude the occurrence of an ectopic pregnancy which may occur even many years after the procedure.

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