

# Role of Imaging in Diagnosis and Management of Ectopic Pregnancy

Essay
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#### **List of Abbreviations**

**AP** Abdominal Pregnancy

**CSP** Cesarean Scar/Section Pregnancy

**CT** Computed Tomography

**D&E** Dilatation & Curettage

**EMM** Endo Myometrial Mantle

**EP** Ectopic Pregnancy

**HOC** Hemorrhagic Ovarian Cyst

**IUP** Intra Uterine Pregnancy

KCL Kalium (potassium) Chloride

**IVF** In vitro fertilization

LUS Lower Uterine Segment

MRI Magnetic Resonance Imaging

MTX Methotrexate

**UAE** Uterine Artery Embolization

**US** Ultrasound

**B-HCG** Beta-Human Chorionic Gonadotrophin

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#### Introduction

The incidence of ectopic pregnancy has increased significantly in the past few decades. This is in part due to an increased incidence of pelvic inflammatory disease and assisted reproduction techniques (*Savolainen*, 2012).

Ultrasound has always been the gold standard imaging modality for those patients, and patients presenting to the emergency department in the first trimester with pregnancy-related complaints in general. This is due to the fact that it does not require the use of potentially harmful ionizing radiation, is readily available, and allows real-time imaging. The use of high-resolution endovaginal sonography, in conjunction with qualitative serum assays of the beta subunit of human chorionic gonadotropin (\$\beta\$-hCG), allows detection of earlier and smaller ectopic pregnancies (*Winder et al., 2011*).

Magnetic resonance imaging is useful. If US is not able to determine the location of a pregnancy and when sonographic diagnosis is unclear, here comes the role of MRI. Examples of this include differentiating an intrauterine pregnancy (IUP) from a cervical or interstitial pregnancy, or determining the anatomic relationships of an abdominal pregnancy (*Tannwald &Oto*, 2013).

Radiology residents are commonly taught to suspect ectopic pregnancy at color Doppler imaging when the "ring of fire" is visualized, owing to the low impedance high diastolic flow seen in pregnancy that can surround the tubal ring of an ectopic pregnancy (*Kupesic*, 2011).

CT scan findings are nonspecific for ectopic pregnancy. Though sometimes used, the associated ionizing radiation poses a hazard if a normal intrauterine pregnancy is present. Still yet, it's typically not an appropriate imaging modality to

#### Introduction and Aim of The Work

be used for the analysis of ectopic pregnancy (Febronio, 2012).

Interventional radiology offers options including chemical injection of an ectopic gestational sac, uterine artery embolization, aspiration and drainage, percutaneous nephrostomy, and suprapubic cystostomy catheter placement. Interventional radiologists play a critical role in treating complications such as tubal or uterine rupture, depending on the location of the pregnancy, which could lead to massive hemorrhage, shock, disseminated intravascular coagulopathy (DIC), and death (Thabet et al., 2012).

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#### **Aim of The Work**

This essay is designed to emphasize the role of different imaging techniques in diagnosis and management of ectopic pregnancy with a trial to highlight the role if interventional radiologist in these critical cases.