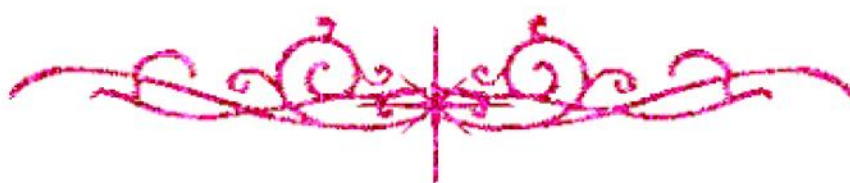


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شبكة المعلومات الجامعية

بسم الله الرحمن الرحيم



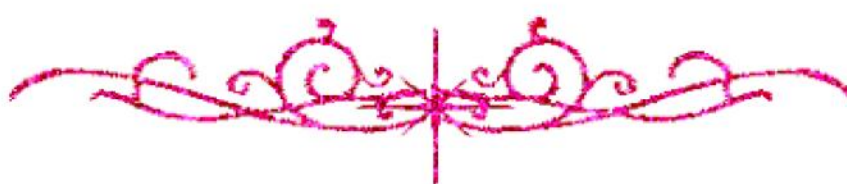
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شبكة المعلومات الجامعية



شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



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شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها
علي هذه الأقراص المدمجة قد أعدت دون أية تغيرات



يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار



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بعض الوثائق الأصلية تالفة



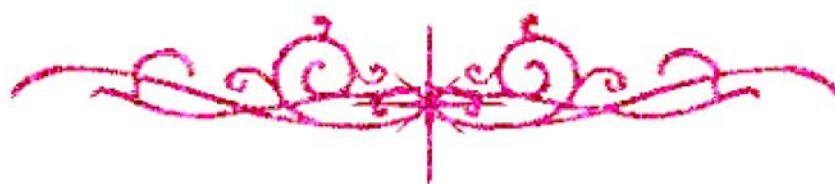
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**بالرسالة صفحات
لم ترد بالأصل**



B 17790

Laparoscopic Conservative Management of Ectopic Pregnancy

Thesis

Submitted for the partial fulfillment of M.D. degree

In
Obstetrics and Gynecology



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Acknowledgments

I would like to express my deepest thanks to Prof. Dr. Mohsen Khairy , Prof of Obstet. And Gynecol Benha Faculty of Medicine, Zagazig University for his generous supervision, valuable helps and advice through the course of this study.

I am very much indebted to Dr. Nabil El-Orabi Assist. Prof. of Obstet. And Gynecol Benha Faculty of Medicine, Zagazig University for his valuable advice, appreciable guidance and collaboration during this study.

Thanks are due to Dr. El-Sayed El-Nagar Assist. Prof. of Obstet. And Gynecol Benha Faculty of Medicine, Zagazig University for his supervision and guidance in revising the written and practical part of the work.

I would like to express my deepest thanks to Dr. Ahmed Mansour lecturer of Obstet. And Gynecol Benha Faculty of Medicine, Zagazig University for his supervision and guidance in revising the written and practical part of the work.

I would like to express my deepest thanks for Benha Faculty of Medicine, Zagazig University which give me this chance. I'll be grateful for all the staff in my life.

TO

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**INTRODUCTION
&
AIM OF WORK**

Introduction

Ectopic pregnancy (E.P.) has become a surgical epidemic during the last 2 decades. In the United states; Goldner et al., (1993) reported a five folds increase in hospitalization from E.P., There is a similar increase in the incidence of E.P. in England and France.

The classical therapy for tubal pregnancy has been the laparotomy and salpingectomy for decades. Because of infertility problems caused by previous ectopic pregnancy management and the organ preserving philosophy, the micro-surgical salpingotomy became more popular in the seventies. The technical development in the field of gynecological endoscopy made it possible to perform the salpingotomy through the laparoscopy (Inovay et al., 1994).

Infertility after ectopic pregnancy is well documented. To a certain extent the subsequent infertility may be the result of the operative trauma to the fallopian tubes, the possible salpingectomy technique and subsequent formation of new pelvic adhesions. So the feasibility of conservative laparoscopic treatment for ectopic pregnancies is well established by linear salpingotomy (Brumsted et al., 1988).

According to Semm, (1988) the treatment of ectopic pregnancy no longer necessarily requires laparotomy.

The results of many studies world wide further support the laparoscopic management of ectopic pregnancy as an efficacious, safe and cost effective approach.

Aim of the work

The aim of this study is to assess the conservative role of laparoscopic surgery in the treatment of ectopic pregnancy and its value in preservation of fertility potentiality during the childbearing period.

REVIEW OF LITERATURE

REVIEW OF LITERATURE



ectopic pregnancy (E.P.) has become a surgical epidemic during the last 2 decades with increasing rate from 4.5 per 1000 reported pregnancies at 1970 to 14.3 per 1000 pregnancies at 1986 at the U.S.; a small reduction in both the number and the incidence of E.P. has occurred in the last 4 years (*Dorfman et al, 1988*).

In the United States; *Goldner et al (1993)* reported a five fold increase in hospitalization for E.P.; from 17800 to 88400 annually between 1970 through to 1989 .In the United Kingdom; the incidence of E.P. has doubled in the decade 1980 --90, and at present about 8000 are treated each year (*Department of health 1994*).

In Leicestershire, England, 122 E.P. per 1000 deliveries. In London in 1990-91, the incidence of E.P. was reported as 26.2 per 1000 deliveries (*Irvine et al, 1994*).

In France, *Couturier et al (1994)* reported 15 E.P. per 1000 deliveries in Paris. Similarly increased incidences of E.P. have been reported from Eastern Europe, and Scandinavia, although the reasons for this internationally observed increase in E.P. are multiple, but can be attributed in part to better reporting ,improved diagnostic tools and acquired risks for this disease in the reproductive population of women.