Conservative management of interstitial pregnancy with ultrasound-guided intraamnionic methotrexate injection

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Objectives
To describe our experience with sonographically guided intraamnionic injection of methotrexate to treat interstitial pregnancy.

Methods
We retrospectively reviewed all cases of interstitial pregnancies treated conservatively through transabdominal ultrasound-guided therapy at our institution from 2013 to 2018.

Results
Nine cases were managed with ultrasound-guided intraamnionic injection of methotrexate during study period. The mean age of the patients was 30.7±5.6 years and the mean gestational age was 6.5±1.4 weeks. The mean initial beta-hCG level was 33,159.1±11,454.0 mIU/mL and the mean diameter of the gestational sac was 15.6±4.3 mm. Of the 6 cases with fetal pole, 3 cases presented cardiac activity. The systemic methotrexate was injected together in 6 cases. We experienced the successful results with conservative management in all cases.

Conclusion
Interstitial pregnancy can be successfully managed without surgical intervention through local injection of methotrexate. This treatment not only abaltes the ectopic pregnancy but also preserves the uterus for subsequent pregnancies.