Diagnosis and prognosis analysis of Caesarean scar pregnancy
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Objectives
To investigate the characteristics and clinical value of transvaginal color Doppler ultrasound in cesarean scar pregnancy. It provides an objective basis for early clinical diagnosis and individualized treatment.

Methods
A retrospective analysis from January 2010 to December 2017 in our hospital cesarean scar pregnancy in 919 cases, including 283 cases of patients from May 2015 -2017 year in June, and analyze the clinical data and pathological results of patients, summarize the ultrasonographic features and the treatment and prognosis.

Results: The age of CSP patients (88.7%) was between 26 and 40 years old. Among 283 cases of Cesarean scar pregnancy after Cesarean section From May 2015 to June -2017 , 263 cases were diagnosed by ultrasound, and the diagnostic coincidence rate was 92.9%. 20 cases were misdiagnosed and the misdiagnosis rate was 7.1%. According to the imaging feature of CSP is divided into:Type I, gestational sac located at the edge of the incision (103 cases, 36.4%), Type II, gestational sac incision (112 cases, 39.6%), Type III, gestational sac protruding toward the direction of bladder (10 cases, 3.5%), Type IV pregnancy (58 cases, a mixed echo 20.5%). This study included 141 cases with high-risk ultrasound-guided curettage after drug treatment; 115 cases with(or not) uterine artery embolization underwent ultrasound monitoring curettage; 12 cases with simple drug treatment; 4 cases with uterine artery embolization in MTX after chemotherapy; 4 cases with simple uterine balloon compression hemostasis; 5 cases not treatment; to continue the pregnancy to term Cesarean section in 2 cases of placenta previa with placenta implantation in 1 cases; placenta previa with adhesion in 1 cases of postpartum hemorrhage, 700ml.

Conclusions: It is beneficial to improve the accuracy of early diagnosis and reduce the rate of misdiagnosis. Transvaginal color Doppler ultrasonography is a simple, accurate, quick and effective diagnostic method for Cesarean scar pregnancy. It provides an important objective basis for early diagnosis and individualized treatment.