Ultrasound diagnosis and management of Interstitial Ectopic Pregnancy
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• Common uterine ectopic pregnancy accounting for 2 to 3% of ectopic pregnancies.
• Pregnancy occurring in the interstitial portion of the fallopian tube.
• Misnomer - Cornual pregnancy
• Can be differentiated from eccentrically located normal intra-uterine pregnancy where the gestational sac is located in the endometrial cavity with trophoblastic tissue not extending beyond the endo-myometrial junction.
• Cornual pregnancy: Implantation of gestational sac in communicating or non-communicating horn.
• Diagnostic ultrasound features: 2D US demonstrates gestational sac eccentrically located with interstitial line inline with endometrium.
• 3D US is diagnostic demonstrating eccentric gestational sac, with trophoblastic tissue crossing the endo-myometrial junction, yolk sac directed towards the tube and thin myometrium (< 1.5mm).
• Treatment options: Expectant / Systemic methotrexate / Local US guided intra sac Methotrexate / Surgery.
• Treatment strategy: depends on location of the sac closer to the uterus - intra-sac methotrexate closer to the tube - surgery
• For faster recovery (IVF) surgery preferred.

Conclusion: Implantation of gestational sac in the interstitial portion of the tube, usually mistaken for eccentrically located normal pregnancy, features such as trophoblastic tissue extending beyond the endo-myometrial junction, yolk sac directed towards the tube, thin (>1.5mm) myometrium confirms interstitial ectopic.
Management - USG guided intra sac methotrexate if sac is close to the uterine cavity.