



**EVALUATION OF THE EFFICACY OF TREATMENT  
FOR CESAREAN SCAR PREGNANCIES  
IN QUANG NINH HOSPITAL OF OBSTETRICS AND PEDIATRICS**

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# INTRODUCTION

- ❖ Cesarean scar pregnancy (CSP) refers to implantation of pregnancy within the myometrial tissue that corresponds to the site of prior hysterotomy
- ❖ Incidence: 1/1800 -1/2500 for all cesarean deliveries
- ❖ Tends to be more frequent



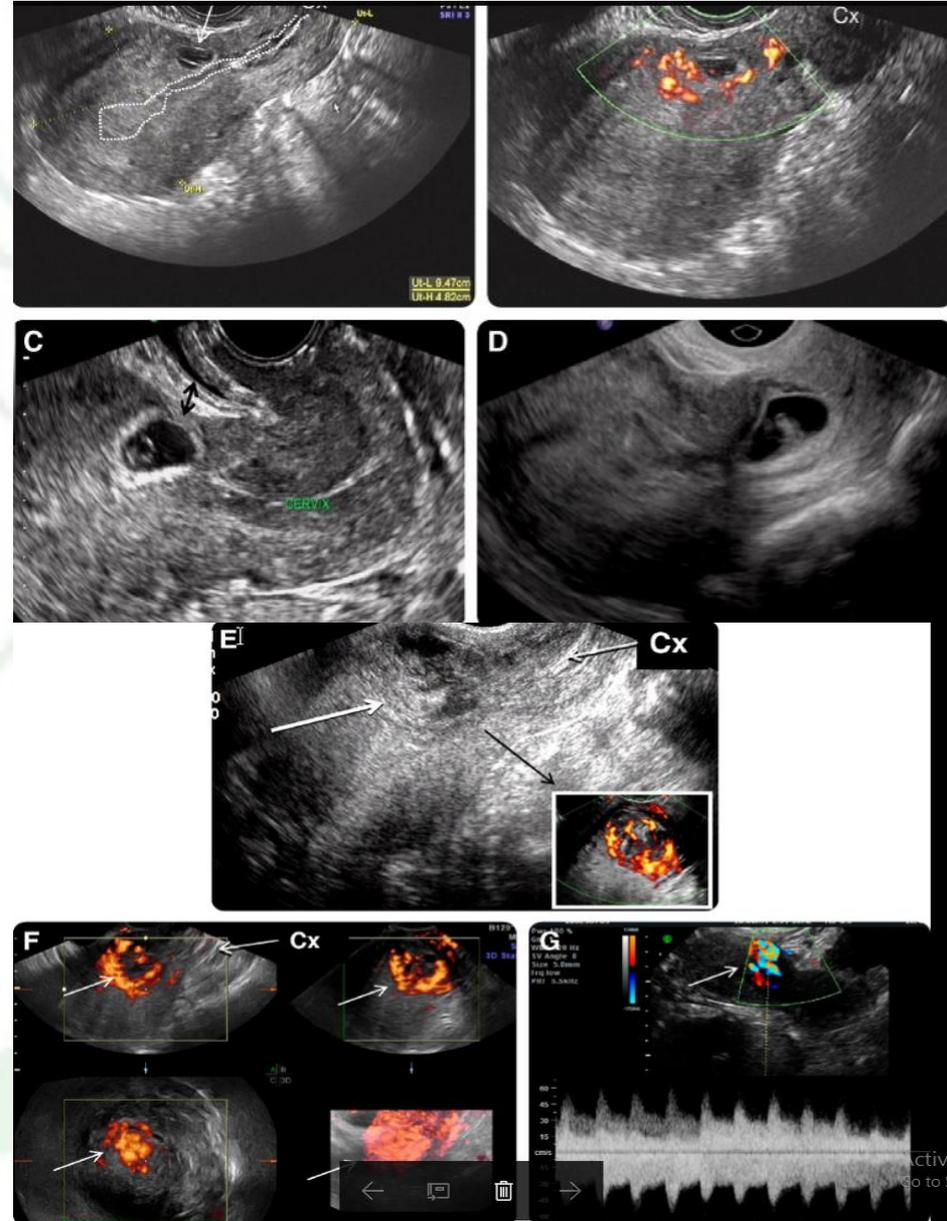
# INTRODUCTION



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Diagnosis criteria:

1. Visualization of an empty uterine cavity
2. A closed and empty cervical canal
3. Discontinuity on the anterior uterine wall as demonstrated on a sagittal plane of the uterus running through the amniotic sac
4. Detection of the placenta and/or a gestational sac embedded in the hysterotomy scar
5. A thin or absent myometrial layer between the gestational sac and the bladder





# INTRODUCTION

## Complications:

- Significant haemorrhage
- Placenta previa, accreta
- Uterine rupture



# INTRODUCTION

- ❖ Treatment options:
  - medical treatment
  - surgical treatment
  - combination of these options
- ❖ Trends: Early diagnosis, treatment with ultrasound-guided suction or combined with MTX



# PURPOSE

To evaluate the efficacy of treatment of cesarean scar pregnancies in Quang Ninh Hospital of Obstetrics and Pediatrics



# SUBJECTS AND METHOD

## ***Subjects***

- All patients diagnosed with CSP, treated at the Dept of Gynecology - Quang Ninh Hospital of Obstetrics and Pediatrics, 2016.



# SUBJECTS AND METHOD

- Retrospective descriptive study
- From 01/01/2016 to 31/12/2016.
- Sample size selection: all eligible patients



# RESULTS

- 27 cases with CSP
- The mean maternal age was 33.4 years, with a range of 27– 45 years. Age group 18-35 had highest proportion (17 out of 27 patients)
- Number of patients with previous cesarean deliveries 1, 2,3 time was 7, 19, 1, respectively

# RESULTS

## Clinical symptoms

Clinical symptoms	N
Amenorrhea and vaginal bleeding	5
Amenorrhea and lower abdominal pain	4
Amenorrhea only*	18

\* Detected only through ultrasound

# RESULTS

## *Gestational age using ultrasound*

<b>Gestational age</b>	<b>4-5</b>	<b>5-6</b>	<b>6-7</b>	<b>&gt;7</b>
<b>N</b>	<b>8</b>	<b>14</b>	<b>5</b>	<b>0</b>

# RESULTS

*Trend to develop:*

- 26/27 gestational sacks had tendency to develop towards the uterine cavity
- 1/27 gestational sacks had tendency to develop towards the bladder



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# RESULTS

## *Pre-treatment $\beta$ HCG levels*

$\beta$ hCG levels mIU/ml	< 5000	5000 – 10000	10001 - 50000	> 50000
N	<b>7</b>	<b>5</b>	<b>10</b>	<b>5</b>

# RESULTS

## *Treatment*

Method	Results	
	Success	Failure
ultrasound-guided suction	26	1
ultrasound-guided suction + MTX	1	0



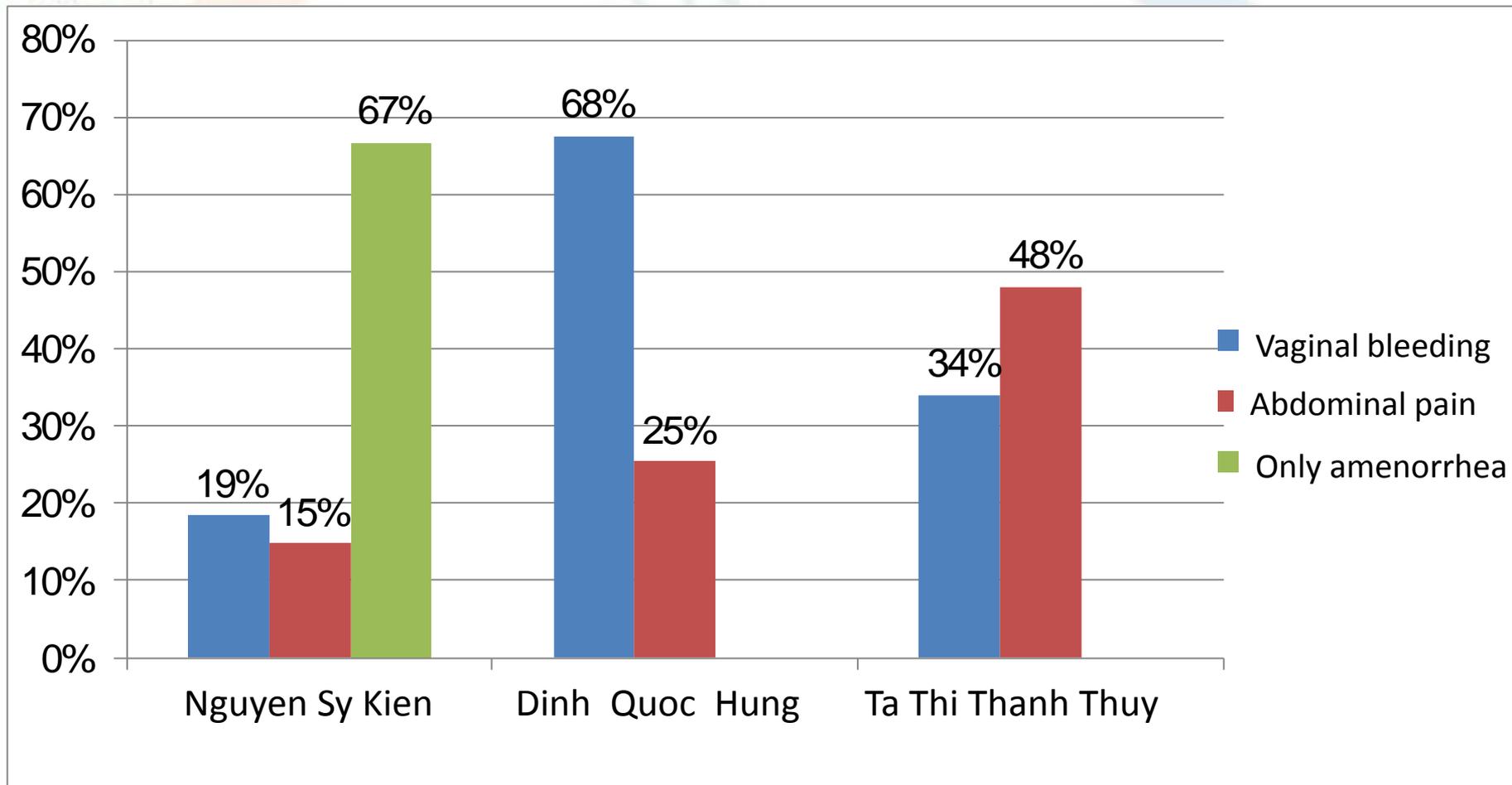
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# DISCUSSION

## CLINICAL SYMPTOMS

- Mean maternal age: 33.4 years
  - Dinh Quoc Hung (2011) : 33 years.
  - Ta Thi Thanh Thuy (2013): 34,45 years.
  - Do Thi Ngoc Lan (2012): 34 years.

# DISCUSSION



## CLINICAL SYMPTOMS



# DISCUSSION

## ULTRASOUND

- Most common gestational age: 5-6 weeks: 51,8 %.
- Dinh Quoc Hung (2011): gestational age < 6 weeks: 39%.
- Ta Thi Thanh Thuy (2013): gestational age < 7 weeks: 69%.



# DISCUSSION

## ULTRASOUND

- 26/27 gestational sacks had tendency to develop towards the uterine cavity, 1 case tends toward bladder
- Do Thi Ngoc Lan (2012): develop toward uterine cavity: 31.3%, intermediate: 40.8% , bladder: 28.1%.
- Position of gestation sack is an important decisive factor for treatment and prognosis the result



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# DISCUSSION

## RESULTS

- 96.3% patients were successfully treated only with ultrasound-guided suction
- Successful rate of ultrasound-guided suction
  - Do Thi Ngoc Lan (2012): 96.1%.
  - Ta Thi Thanh Thuy (2013): 80%.
- Small GS with tendency develop toward uterine cavity can be treated by ultrasound-guided suction with high succes rate



# CONCLUSION

- Symptoms are poor and not specific
- Transvaginal ultrasound and beta HCG: important for diagnosis, treatment
- Ultrasound-guided suction: small GS and tend to develop toward uterine cavity.
- Ultrasound-guided suction plus MTX: if after suction, the beta HCG level doesn't decrease and inhomogeneous echogenicity mass still exists in scar position



**BỆNH VIỆN SẢN NHI QUẢNG NINH**  
*Nâng tầm hạnh phúc*

**THANK YOU**