

Case Report on Failed Tubectomy Resulting in 3 Pregnancies (1 Intrauterine and 2 Ectopic) - An Obstetrician's Error

Nayini Krishna Sree¹, Ratnam Andallu²

Post Graduate, Department of Obstetrics and Gynecology, Osmania Medical College

Professor, Department of Obstetrics and Gynecology, Osmania Medical College

Abstract: Female sterilization through tubal ligation, a common method of contraception, may occasionally fail, leading to potentially life threatening complications such as ectopic pregnancies. This article presents a case report of G7P3L3A2E1 who experienced 3 pregnancies due to failed tubal ligation, highlighting the obstetricians errors that contributed to these occurrences, the study analyses the associated morbidity and emphasizes the importance of immediate sterilization and salpingectomy as a preventive measure in such cases. Additionally it discusses recent research findings that support the efficacy of risk reducing salpingectomy in reducing sterilization failure and subsequent ectopic pregnancies. This case underscores the significance of early detection, intervention and comprehensive management to minimize maternal morbidity and mortality in cases of failed tubal ligation.

Keywords: Tubal ligation, failed sterilization, ectopic pregnancy, salpingectomy and maternal morbidity

1. Introduction

Female sterilization by tubal ligation is the most commonly used permanent method of contraception but failure of which results in ectopic pregnancy which is a major cause of morbidity and mortality in a reproductive women in 1st trimester of pregnancy.

Aims and objectives:

- To analyse the morbidity with failed tubectomy resulting in intrauterine/extra uterine pregnancy
- To analyse the obstetricians error that caused three pregnancies(1 intrauterine,2 ectopic)

2. Case Report

A case of G7P3L3A2E1 with 3 prev lscs,during 3rd lscs intracaesarean b/l tubal ligation done which failed resulting in intrauterine pregnancy after 1 year for which only MTP done without tubectomy by obstetrician. After 4 yrs again she conceived with right tubal ectopic pregnancy for which laproscopic ectopic resection was done without tubectomy/tubal ligation (2nd error). By not doing tubal ligation she conceived for the 3rd time and had left unruptured tubal ectopic pregnancy of 5 weeks GA and presented to our hospital...on examination pt has stable vitals and normal per abdominal and bimanual examination findings, upt positive, b-hcg-7220,we have medically managed the pt with 2 doses of methotrexate 1 week apart and pt was discharged in stable condition with OCP as temporary contraceptive advice and proceeded with total salpingectomy after 3 months.

3. Discussion

In a study of failed tubectomy-2/3rd cases are of intrauterine pregnancy and 1/3rd cases are of ectopic pregnancy [1]

In another study of standard tubal ligation vs RRS(Risk Reducing Salpingectomy)-It was found that reduction of sterilization failure with noectopic pregnancies and also reduction in subsequent ovarian cancer risk in RRS[2]

4. Conclusion

In cases of missed period after tubal ligation we have to suspect failure and exclude ectopic pregnancy. While managing a case of pregnancy of failed tubectomy the obstetrician should do sterilization immediately and by resorting to salpingectomy in such cases we can minimize further failure and further ectopic pregnancies and thereby minimizing maternal morbidity and mortality.

References

- [1] International Journal of Reproduction, Contraception, Obstetrics and Gynecology Jadhav BJ et al. Int J Reprod Contracept Obstet Gynecol. 2021 Oct;10(10):3775-3778 www.ijrcog.org
- [2] Zerden ML, Castellano T, Doll KM, Stuart GS, Munoz MC, Boggess KA. Risk-Reducing Salpingectomy Versus Standard Tubal Sterilization: Lessons From Offering Women Options for Interval Sterilization. South Med J. 2018 Mar; 111(3):173-177. doi: 10.14423/SMJ.0000000000000779. PMID: 29505655; PMCID: PMC6419963.