

## Cervical Ectopic Pregnancy Case Report

**Authors :** Berrak Yildiz, Hinal Shah, Justine Fernandez, Nazje James, Anna Brown

**Abstract :** Cervical ectopic pregnancy, a rare type of ectopic pregnancies, is defined by blastocyst implantation within the cervical canal rather than the endometrium. Its rarity and potential for severe hemorrhage make cervical ectopic pregnancy a diagnostic and therapeutic challenge. A 39-year-old woman, G5P2022, with a history of two cesarean sections and two elective terminations, presented to the emergency department with vaginal bleeding and pelvic pain. Initial assessment showed a beta-hCG level of 2,853 mIU/mL, and transvaginal ultrasound revealed a small, irregular gestational sac at the level of the internal cervical os. Serial beta-hCG measurements over subsequent visits showed a declining trend, consistent with a nonviable pregnancy. The patient was ultimately treated with methotrexate at a dose of 50 mg/m<sup>2</sup> (total 100 mg), following which she reported no further symptoms. On follow-up, her beta-hCG level returned to the normal non-pregnant range, with no additional intervention needed. This case highlights the importance of early diagnosis in cervical ectopic pregnancy to avoid complications like hysterectomy. Methotrexate is an effective first-line treatment in hemodynamically stable patients, offering a conservative approach that can preserve fertility. The success in this patient underscores the role of prompt diagnosis and careful management in achieving resolution while minimizing invasive procedures.

**Keywords :** beta-hCG, cervical, ectopic, methotrexate

**Conference Title :** ICOG 2024 : International Conference on Obstetrics and Gynaecology

**Conference Location :** New York, United States

**Conference Dates :** December 09-10, 2024