

Abdominal pregnancy: mini review

Introduction

Abdominal pregnancy is very rare condition of an ectopic pregnancy, defined as pregnancy occurring anywhere within the peritoneal cavity, exclusive of tubal, ovarian, or broad ligament.¹ An estimated incidence is 1 in 8,000 births and 1.4 % of whole an ectopic pregnancies.² The most common implanting of abdominal pregnancy is Pouch of Douglas, but very rarely it may implant in the upper abdomen.³ However, implantation on other abdominal organs such as spleen, liver, and appendix is also reported.^{4,5} Therefore the diagnosis of abdominal pregnancy, Studdiford's criteria description include:

- Typical normal both side fallopian tubes and ovaries
- No utero-peritoneal fistula
- Pregnancy-related to the peritoneal surface and early enough the possibility of secondary implantation followed by a primary location in the tube.⁶

The maternal mortality range varies from 2% to 30%, but this percentage can be further reduced by early diagnosis.⁷ If there is no cardiac activity in the fetus, then surgical approach is indicated here because of the complications such as infection or hematological disorders such as disseminated intravascular coagulation (DIC).

Some of gynecologists may recommend a period of observation of 3 to 8 weeks to allow atrophy to occur in placental vessels.⁸ If there is cardiac activity in the fetus, laparotomy is highly recommended, independent of gestational age or fetal condition.⁹ One of the most recent therapeutic approaches include ultrasonography guide injections such as methotrexate without need for exploratory laparotomy, it will lead in a gradual resorption of the products of conception without complications.¹⁰ However, there is a publication from Ghana that there is abdominal pregnancy that result in a full term baby at Regional Hospital.¹¹

The proper management of abdominal pregnancy depends on the suspension of the physician, especially if nothing seen in ovaries, tubes and broad ligament. Actually, US and B-HCG sometimes can help to reach the diagnosis. The laparoscopic approach plays an important role if an ectopic pregnancy cannot be seen or ruled out, then all the abdomen should be seen including all the organs. If the diagnosis still vague we can use another approach such as MRI or intraoperative US.¹²

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Conflicts of interest

The authors declare no conflicts of interest.

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