



## Conservative treatment of cervical and cesarean scar pregnancies

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### Objective

To analyze the effectiveness and outcome of conservative treatment in cases of abnormally-located intrauterine pregnancies (cervical and cesarean scar).

### Methods

A retrospective analysis was performed of 30 pregnant women hospitalized due to abnormally-located intrauterine pregnancies. The analyzed group comprised 24 pregnant women with abnormally-located pregnancies. The patients were divided into two groups: The first group consisted of patients treated systemically with Methotrexate, while the second of those treated locally by administration of Methotrexate and/or potassium chloride by gestational sac puncture.

### Results

The analyzed group comprised 24 pregnant women with abnormally-located pregnancies. Eight patients were diagnosed with cervical pregnancy (CP) and Sixteen patients were diagnosed with cesarean scar pregnancy (CSP). Six patients were excluded from the study: two with spontaneous abortions, two heterotopic pregnancies and two cornual pregnancies. Twelve analyzed patients underwent Methotrexate (MTX) systemic administration (five patients with CP, seven with CSP). In five patients, systemic treatment was ineffective; they were qualified for additional local therapy with gestational sac (GS) puncture and MTX or Potassium Chloride (KCl) administration to the sac and additional administration of MTX to the trophoblast area. In 12 patients (3 CP, 9 CSP), local treatment (GS puncture with MTX or MTX + KCL) was used as the first line treatment. One patient underwent combined treatment (local + systemic).

### Conclusion

Conservative treatment should be the gold standard procedure in abnormally-located intrauterine pregnancies. It is noticeable that MTX / KCl is more effective in a direct administration to the GS. In four cases, systemic MTX did not produce the desired effects. In these cases, the treatment was assisted by local administration of MTX or KCL, resulting in the termination of an abnormally-located pregnancy.