

Heterotopic multiple pregnancy after assisted reproduction---A case report

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INTRODUCTION: Heterotopic pregnancy, defined as the coexistence of an intrauterine pregnancy and an ectopic pregnancy, is potentially catastrophic because of its rarity and diagnostic difficulty. Unfortunately, the extended use of assisted reproductive techniques raised the incidence of heterotopic pregnancy to approximately 1 in 100 pregnancies conceived by in vitro fertilization and embryo transfer (IVF-ET). It is well documented that preexisting tubal damage increases the risk of ectopic pregnancy related to IVF-ET and the hormonal milieu created by ovulation induction may also play a part in altered tubal function and embryo transport. Here we present a case of tubal infertility and then conceived heterotopic multiple pregnancy following IVF-ET in our clinic.

CASE: The 36 year-old female is a case of primary infertility for 6 years with a history of bilateral tubo-ovarian abscess. She was enrolled into an IVF-ET program and then conceived. A total of four embryos were transferred. First sonographic examination revealed two intrauterine gestational sacs. Vaginal bleeding occurred one week later. The ultrasound scan was performed and revealed only one fetal pole with cardiac activity in one of the two gestational sacs. She was treated under the impression of threatened abortion. Acute onset of severe abdominal pain occurred one week later and an emergent laparotomy was arranged under the impression of internal bleeding. Bilateral tubal pregnancies were noted and then bilateral salpingectomy were performed. The intrauterine pregnancy went on smoothly after the operation. The patient is now at the 31st gestational week.

CONCLUSION: Physicians should be aware of the possibility of heterotopic pregnancy especially when a patient has a history of tubal damage and become pregnant by IVF-ET. Prompt diagnosis and surgical intervention often yield a better outcome.