

Abstract

Primary ovarian ectopic pregnancy remains a rare but important differential diagnosis of ectopic pregnancies. More cases will be diagnosed as a result of fertility treatments, better ultrasound scanning and laparoscopy. The aetiology is unknown. Since 1990 we found fertility treatments (18.1%) and intra uterine contraceptive device (19.3%) remains important risk factors. A world literature review of all cases since 1995 revealed a laparoscopic intervention rate of 51.9% well below the UK reported rate of 85.9%. Only eight patients were treated medically with a success rate of 50%. The original 1878 Spiegelberg's criterion for diagnosis still applies but the addition of modern ultrasound scanning has made a radiological diagnosis possible. The management of OEP remains similar to that of a tubal ectopic pregnancy with the same challenges. Laparoscopy with ovarian sparing in the hemodynamically stable woman is today the expected standard of management.