

## **Ruptured tubal pregnancy following tubal sterilization**

### **Abstract:**

Prior tubal sterilization should be regarded as a possible etiologic factor in the pathogenesis of ectopic pregnancy. The authors present the case of a 32-year-old woman, para 4, who presented to Kenyatta National Hospital in October 1985 with complaints of lower abdominal pain and vomiting. She had undergone tubal ligation in February 1985. Examination revealed a ruptured ectopic pregnancy in the lateral part of the left tube. There was active bleeding from the rupture. The right distal stump was intact, and the right proximal stump had no obvious defect. There was a corpus luteum in the left ovary. Ectopic gestation after tubal sterilization apparently occurs when there is recanalization and formation of a proximal tuboperitoneal fistula, allowing sperm passage and fertilization of the ovum in the peritoneal cavity, on the ovarian surface or within the ductal tubal lumen. Although the technical details of this patient's sterilization were not available, laparotomy indicated that a modified Pomeroy procedure using absorbable sutures had been performed. The failure rate for the Pomeroy procedure is estimated at 0.25-2%. Since the incidence of ectopic pregnancy following tubal sterilization is about 1 in 13 in some parts of the world, potential sterilization acceptors should be counseled about this complication and a diagnosis of ectopic gestation should be considered whenever a patient with a previous history of tubal ligation presents with signs or symptoms of pregnancy.