

## 27th Annual National Family Practitioners Congress

AUDITING OF MANAGEMENT AND OUTCOME OF ECTOPIC PREGNANCIES AT A DISTRICT HOSPITAL IN GAUTENG, SOUTH AFRICA.

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# INTRODUCTION

- Ectopic pregnancy (EP) present serious hazard to women's health & reproductive potential.
- Requires prompt recognition and early intervention.
- Delays in diagnosis & lack of resources in the primary health care setting may lead to high maternal morbidity and mortality.
- The aim of the study is to audit management and outcomes of EP at a district hospital in the Gauteng province, South Africa.

# PREVALENCE OF EP

- Globally: 1-2%
- Sub-Saharan Africa (SSA): 1-3%
- South Africa (SA): 11/1000 pregnancies(1.1%)

## Maternal Mortality:

- SSA (3%) vs SA (2%)

# METHODOLOGY



## Objectives:

Describe socio-demographics, identify risk factors, assess diagnosis and treatment procedures and evaluate post-treatment outcomes.



## Design

Retrospective cross-sectional study (2021–2023).



## Settings

District hospital serving ~880,000 people across Gauteng and North-West provinces.



## Sample size

Population -198

Sample size- 134

## Convenient sampling



Structured proforma



## Analysis

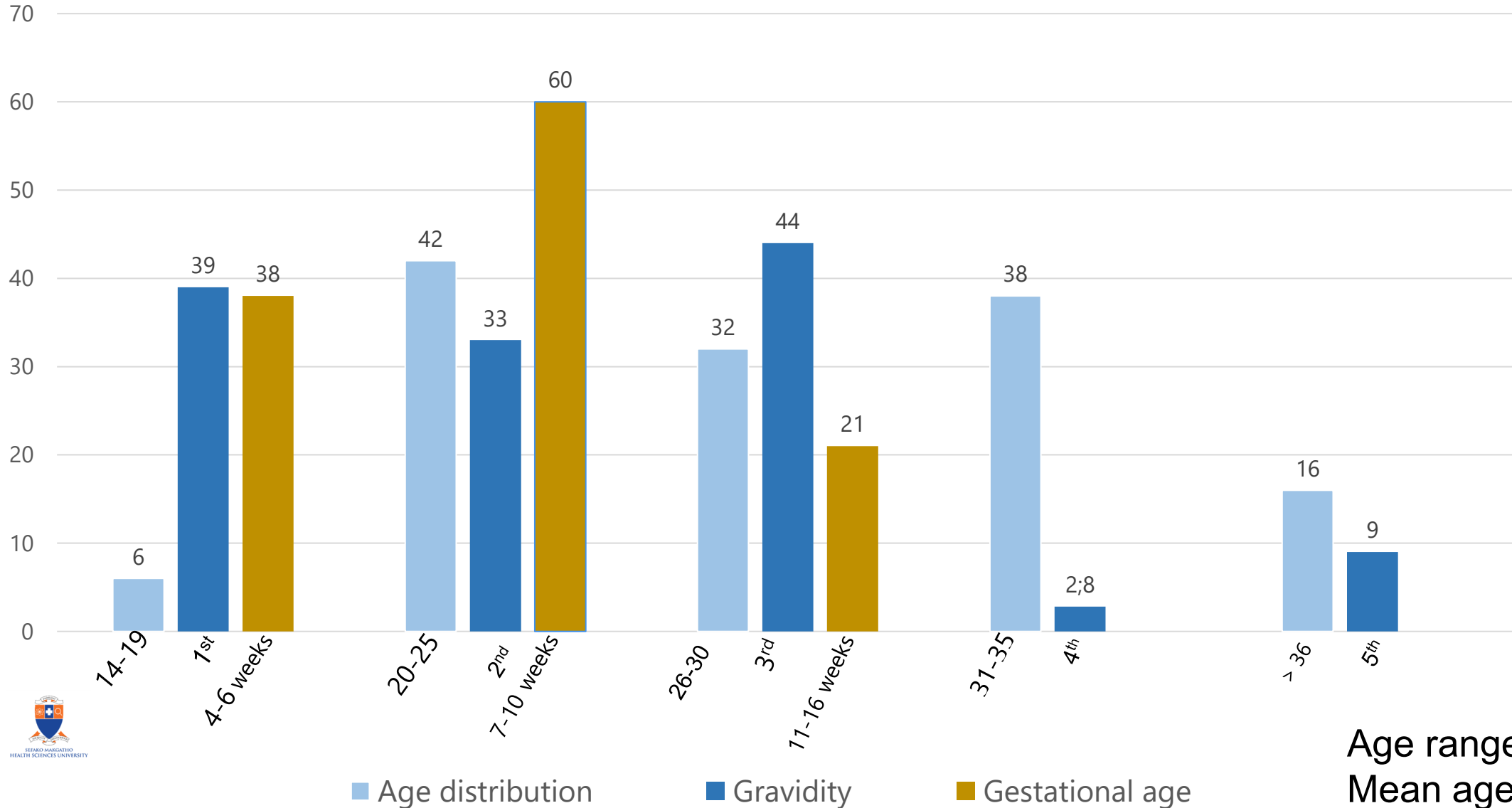
Descriptive statistics, SAS software.



## Ethics

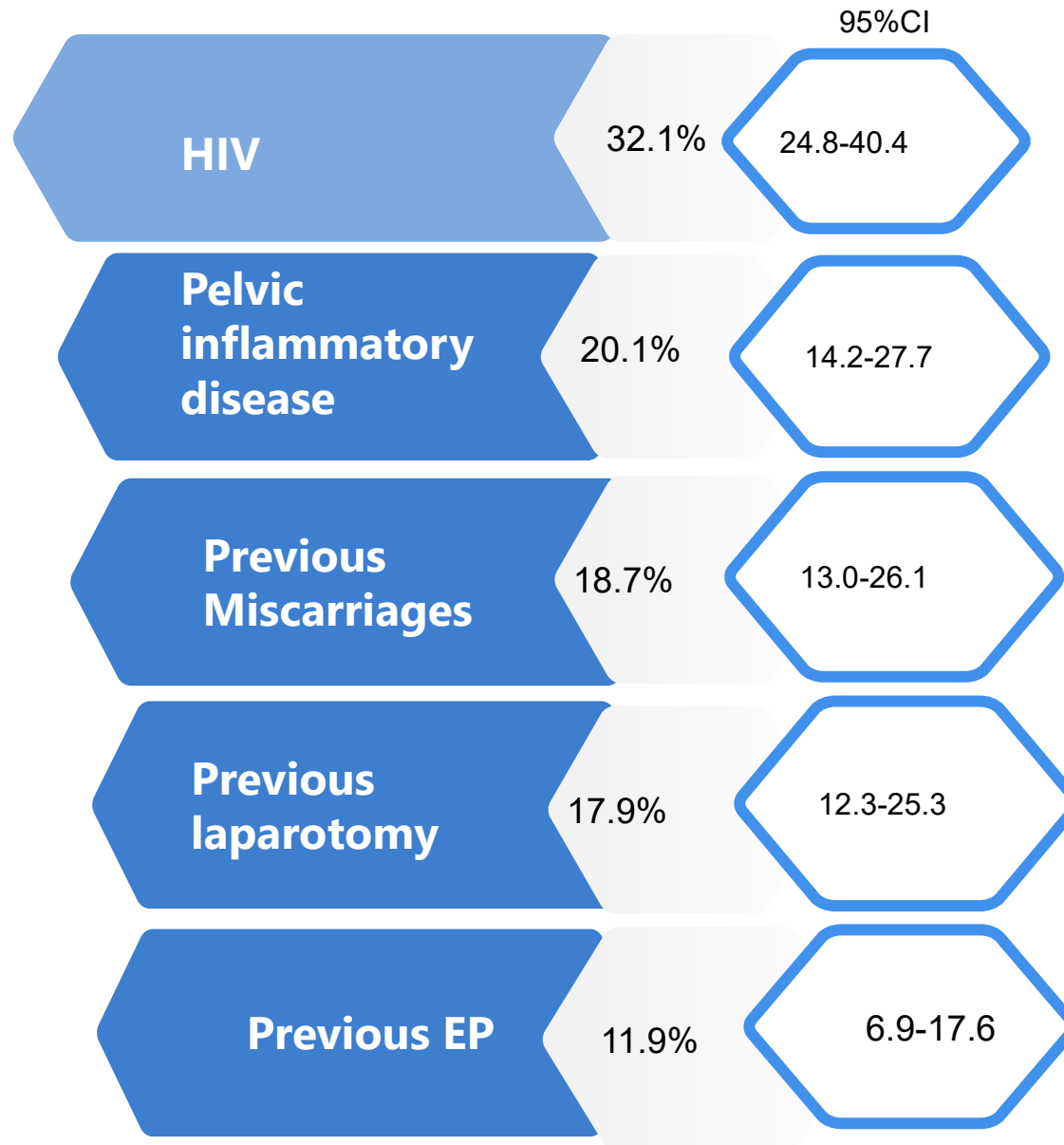
Approved by SMUREC and Tshwane Research Committee.

# RESULTS: DEMOGRAPHIC INSIGHTS

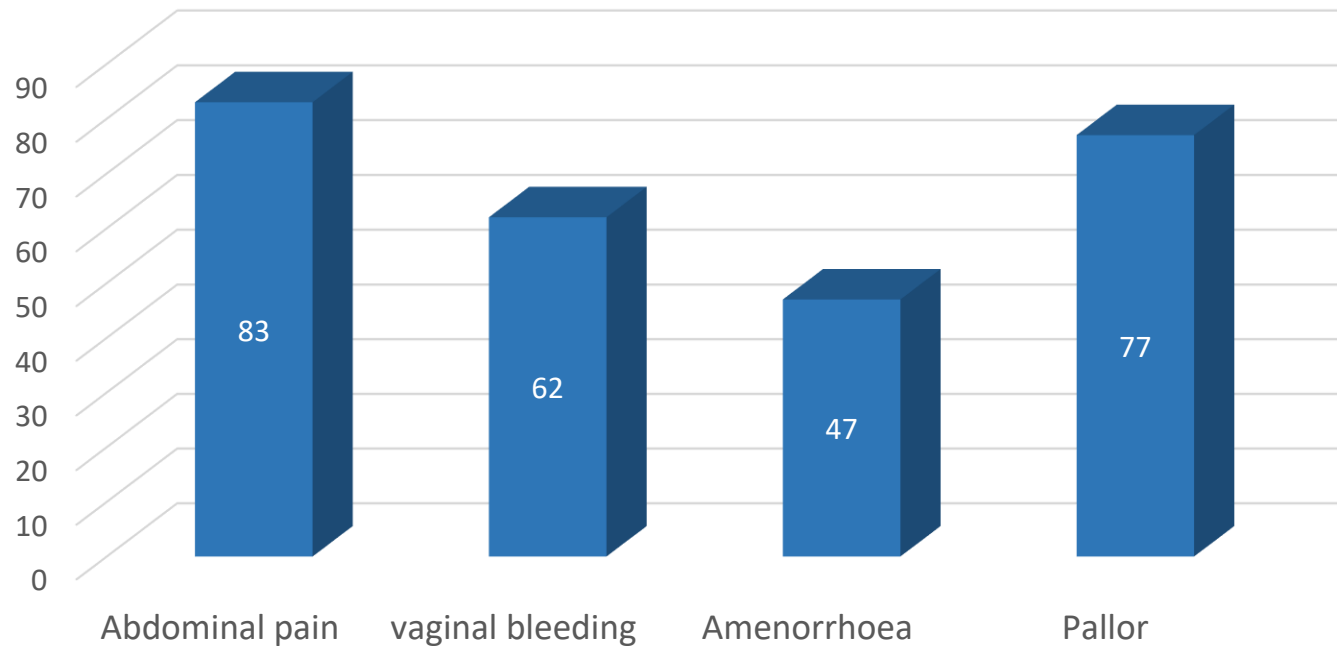


Age range 14 - 41  
Mean age:  $28.1 \pm 6.38$ .

# RESULTS: RISK FACTORS



# RESULTS: CLINICAL PRESENTATION AND DIAGNOSIS.

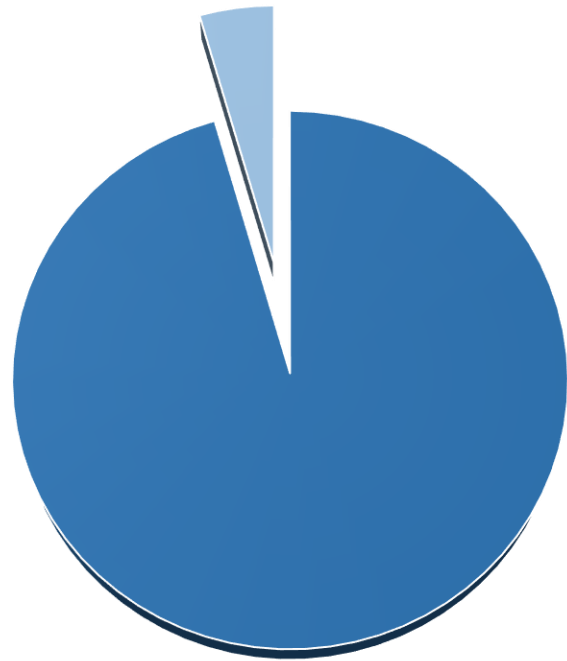


- $\beta$ - HCG was done in all patients
- Ultrasound was done in 120 (90%) participants.

These clinical presentations, while indicative, often overlap with other conditions, necessitating a high index of suspicion and prompt diagnostic evaluation.

# RESULTS :MANAGEMENT STRATEGIES

## TREATMENT MODALITIES



■ SURGICAL ■ MEDICAL

The management of ectopic pregnancy primarily involves surgical intervention, though medical management with methotrexate offers a less invasive alternative for suitable candidates.

**Salpingectomy:**  
Performed in 101 cases.

**Oophorectomy:**  
performed in 18 cases.

Of the 77 patients who had pallor, **44 had blood transfusions.**

7 patients received psychotherapy.

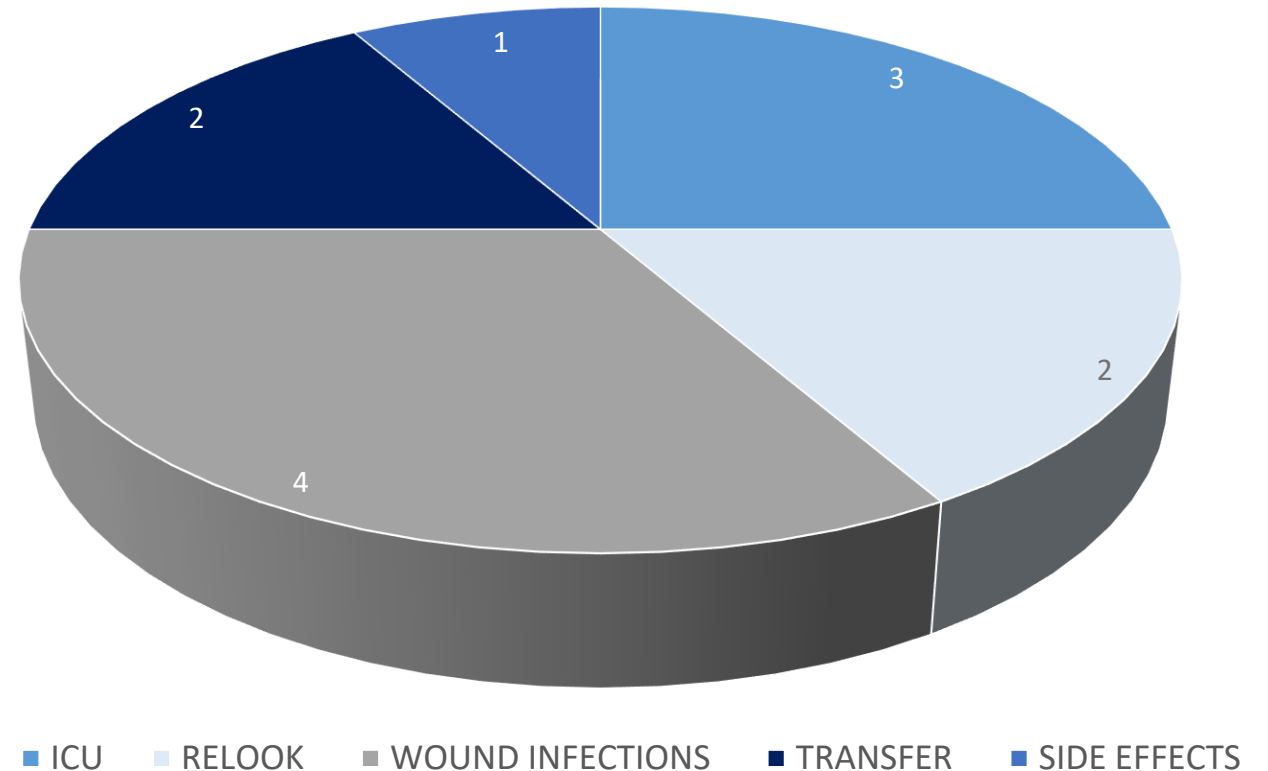
# RESULTS: PATIENT OUTCOMES

## Hospital stay

- Surgically managed participants: **4-6 days.**
- Medically managed : **1-2 days**

- Crucially, the study reported **no maternal mortality** from ectopic pregnancy, indicating effective emergency response and management.

## COMPLICATIONS



# DISCUSSION

- EP affects mostly young women (**20–25 years**).
- High index of suspicion needed even in first pregnancy.
- **HIV infection, PID and prior surgeries** are major risk contributors.
- Late presentation increases risk of rupture and complications.
- Surgical treatment dominates due to delayed diagnosis.



## Health systems and processes.

- Strengthen primary care protocols and training.
- Enhance record-keeping
- Promote minimally invasive surgery.



## Integrated Care for STI

- Patient education.
- Integrate HIV and reproductive health services emphasized.



## Psychological Support

- Mental health support is essential post-EP care.



# CONCLUSIONS AND ACKNOWLEDGEMENT

- In conclusion, these study findings will assist policy makers to refine clinical protocols, improve patient education, and ultimately enhance the quality of care for women with EP in primary health care settings.
- Timely care in ectopic pregnancy is more than treatment; it is hope, safety, and lives restored.

## Special thanks to:

- My supervisors/mentors
- Jubilee hospital staff
- Conference organizers
- **DISCOVERY FOUNDATION**



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