



SUCCESSFUL PREGNANCY POST BILATERAL UTERINE ARTERY EMBOLIZATION FOR UTERINE ARTERIOVENOUS MALFORMATION; A RARE CASE REPORT STUDY.



Hammad MF¹, Maaly MA², Alwaraky MS¹, Kamel MA², Hamza. HA³

1 Interventional Radiology, National Liver Institute, Menoufia, Egypt.

2 Radiodiagnosis, Faculty of Medicine, Menoufia University, Menoufia, Egypt.

3 Obstetrics & Gynecology, Faculty of Medicine, Menoufia University, Egypt.

Introduction

Uterine arteriovenous malformation (AVM) is a rare condition. Despite being rare, it is a life threatening condition. Clinical presentation varies from no symptom to various degree of menorrhagia with massive life threatening vaginal bleeding. Clinical suspicion is essential for a prompt diagnosis and treatment. Uterine Artery Embolization (UAE) is an established treatment for uterine AVM. Although the pathogenesis of infertility after bilateral UAE is not yet known, the peculiarity of this case is to describe the efficacy of bilateral UAE on fertility in management of AVM case who desired future pregnancy.

Material & Methods

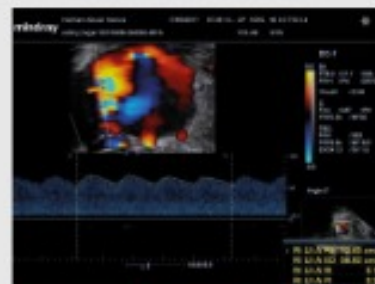
A 27-year-old woman, gravida 3 para 2, diagnosed by Trans-abdominal & transvaginal color Doppler ultrasound as high flow uterine AVM after treated ectopic pregnancy by methotrexate. Through single femoral puncture access uterine artery angiogram confirmed an AVM in the fundal region with an early draining vein so bilateral UAE was done in two successive sessions with one week interval firstly by Histoacryl with lipidol then by Coils. Embolization proceeded until a standing column of contrast in the uterine artery observed. Follow up by quantitative serum β hCG & transvaginal color Doppler ultrasound for 6 months

Conclusion

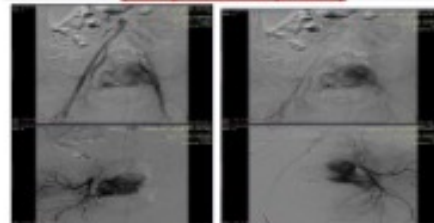
Conclusion: Bilateral UAE is a safe and effective technique for management of uterine AVM & should be considered an initial therapy in symptomatic women with AVM at reproductive age desiring fertility.

Results:

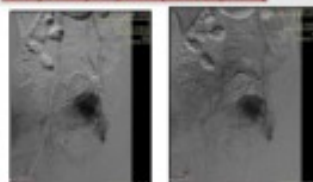
Results: Cessation of bleeding with no recurrence, normalization of β hCG serum level, marked reduction of the size & the flow of the AVM during the 6 months of follow up. Our AVM case has completely recovered then got pregnant after six months of embolization and had successful delivery of normal full term fetus with no reported complication showing high level of satisfaction & self-reported improvements with the obtained outcomes.



**Angiography of Pre UAE for AVM case
(Early Arterial phase)**

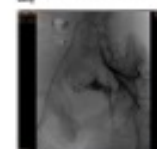


**Pre-embolization angiography of the uterine
artery, Delayed phase (venous phase)**

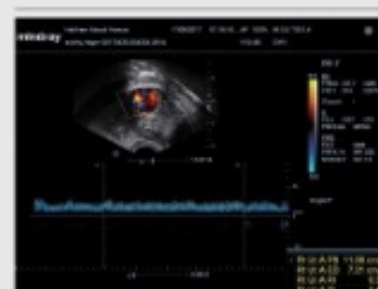


POST UAE

Post UAE angiography by Histoacryl
only



post embolization angiography of
bilateral UAE by Histoacryl coils



Keywords: UAE, AVM, Abnormal Uterine bleeding, Histoacryl, Coils.