

Regarding “Complete Resection of Retroperitoneal Ectopic Pregnancy Adherent to the Inferior Vena Cava by Laparoscopy”

To the Editor

Tong et al [1] shot an excellent article describing an accurate surgical dissection of a retroperitoneal ectopic pregnancy (EP) on the inferior vena cava and the approach to treating the unusual EP site. This article asserts how the laparoscopic approach represents safe and effective management of unconventional EP sites. We considered that, in this context, it would have been interesting to also evaluate a recent work in which we described a case of laparoscopically treated retroperitoneal pregnancy [2].

In light of treating the EP in unusual sites with a minimally invasive surgery, we think it should be important to mention the above video, given that both cases share a retroperitoneal EP in complex locations (i.e., on the inferior vena cava and at the level of the parametrium), which justifies the feasibility of the laparoscopic approach for unconventional sites of EP, as discussed by Tong et al [1]. This is to underline how, despite different positions, laparoscopy may be the best option in the upper abdomen and pelvis and on neural and vascular dangerous sites.

It would be best to consider the pathogenesis of retroperitoneal EP to identify high-risk patients, manage them better, and reduce the delay in diagnosing this rare but more frequent condition. In this regard, Coyne et al [3] agreed that endometriosis could be one of the causes of the genesis of this rare pathology. It would have been helpful to evaluate whether the patient described in the article had endometriosis and consider this aspect in the pathogenesis of retroperitoneal pregnancy to consolidate this theory.

Tong et al [1] emphasized that laparotomy was an unnecessary approach to control bleeding, even in a risky anatomic position, as demonstrated in their study. We agree with Tong et al [1] and Coyne et al [3], considering laparoscopy as a feasible, safe, and more accurate approach to retroperitoneal EP when entrusted to the expert hands of gynecologists experienced in oncology or deep endometriosis.

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References

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3. Coyne K, Flyckt R, Findley J. A management algorithm and proposed pathogenesis for retroperitoneal ectopic pregnancies. *Fertil Steril.* 2021;116:1200–1201.

Authors’ Reply

To the Editor

Di Lorenzo et al [1] suggested that it was important to recognize the retroperitoneal ectopic pregnancy (REP) early and identify its risk factors, such as endometriosis. However, there was no sign of endometriosis in our case, but consolidation of the right fallopian tube lumen that was found suggested that the dysfunction of transportation for fertilized eggs might lead to ectopic implantation [2]. There are 3 main hypotheses of REP: (1) the retroperitoneal sinus hypothesis, (2) the peritoneal erosion hypothesis, and (3) the intralymphatic