# The use of the VOCAL-measured VI for treatment follow-up of scar pregnancies I. Dehaene, E. Roets, K. Roelens, G. Vandenberghe, M. Temmerman. University Hospital Ghent, Ghent, Belgium

#### Introduction

Scar pregnancy is a rare form of ectopic pregnancy. There is no consensus on the treatment modality. Follow up of efficacy of treatment is therefore imperative. Volume Calculation (VOCAL) is a 3D-technique which, in combination with Power Doppler, allows measurement of a vascularity index (VI). The vascularity index illustrates the amount of vessels supplying the pregnancy.

### Cases

Case1: gestational age of 9 weeks, managed with mifepristone and methotrexate, intramuscular and intraamniotically. Follow-up: hCG-level + sonography (gestational sac volume and VI). Figure 1 & 3.

Case2: gestational age of 6 weeks, managed with methotrexate, intramuscular and intra-amniotically. Follow-up: hCGlevel + sonography (gestational sac volume and VI). Figure 2.

### **Pictures**

When therapy is effective, a decline in hCG levels and sonographic parameters are observed. The figures demonstrate a more rapid decline in VI compared to the decline in gestational sac volume.

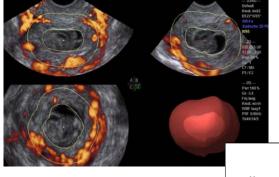
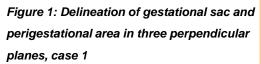
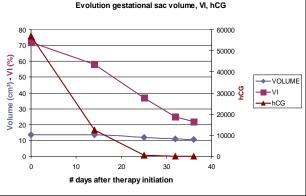


Figure 2: Graph illustrating more rapid decline in VI compared to gestational sac volume, case 2





## **Discussion**

The VI seems to be more accurate than the gestational sac volume in the follow-up of treatment of a scar pregnancy. Since scar pregnancy is rare and management therefore is difficult to optimize, the VI can, in addition to the hCG levels, help evaluate the efficacy of treatment.

## Conclusion

The VOCAL-measured **Vascularity Index is** possibly a useful tool in follow-up of scar pregnancy treatment.