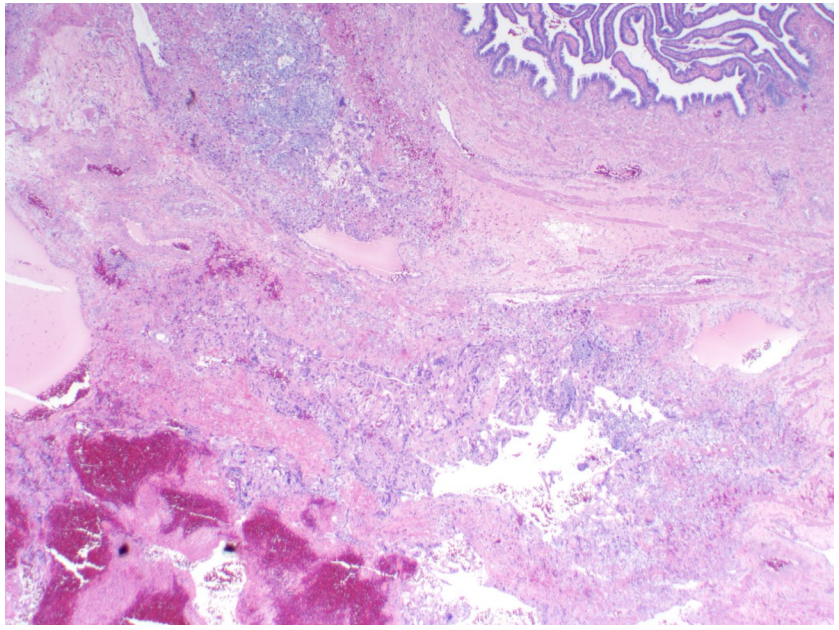
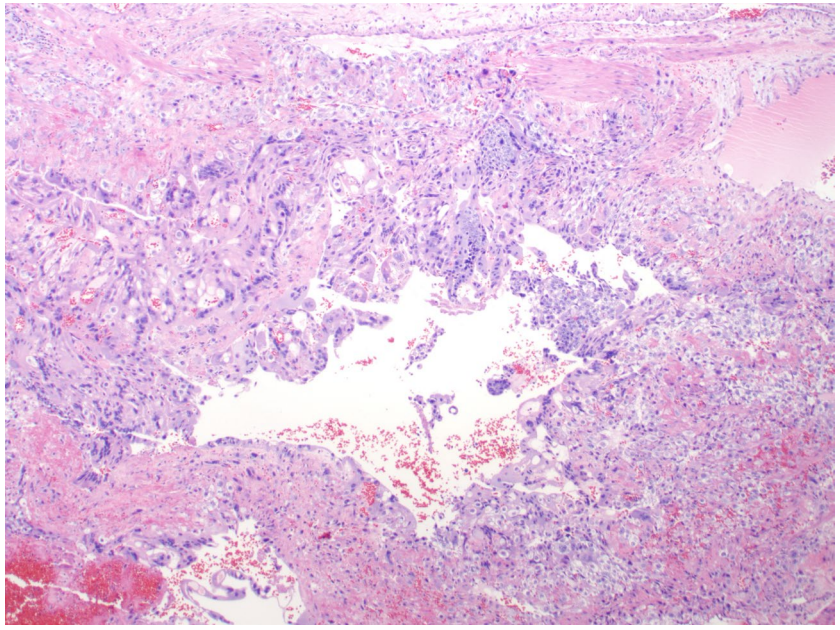
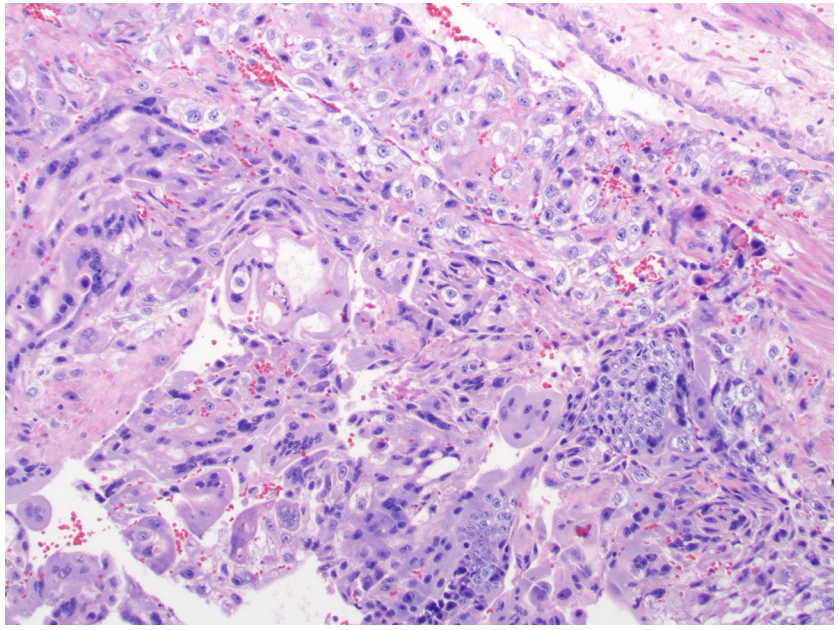
Where Knowledge is Created and Shared
Yale Pathology

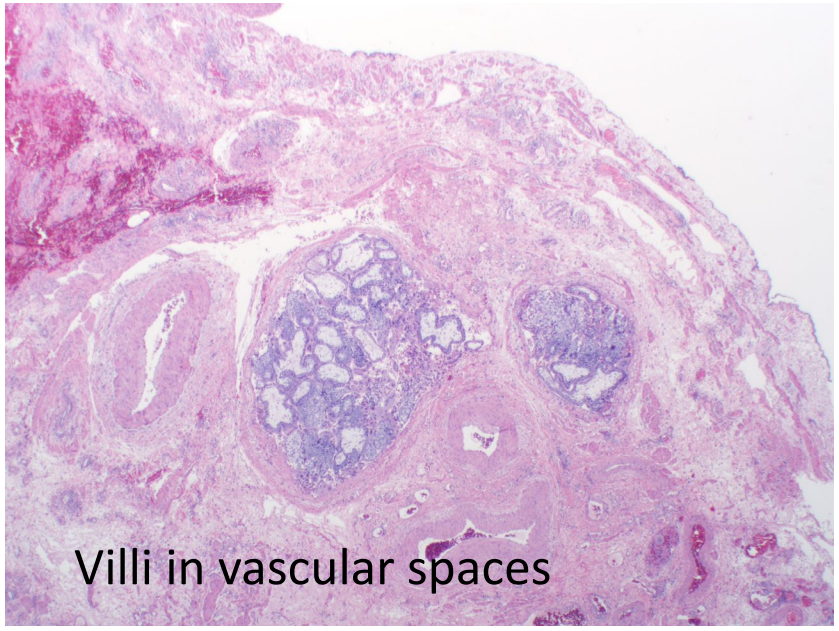
Case Presentation

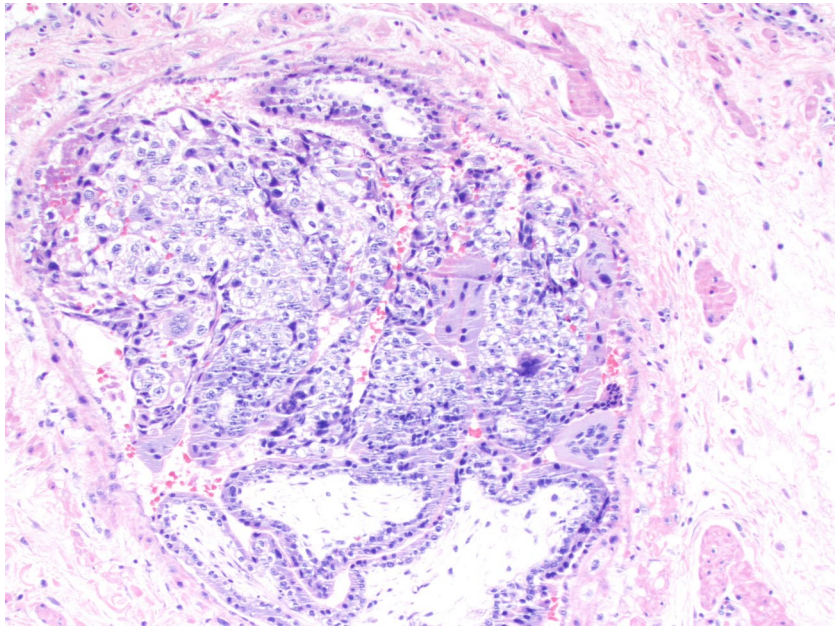
A 37-year-old woman presented with ectopic pregnancy undergoing salpingectomy. Normal STR genotype of chorionic villi is observed.

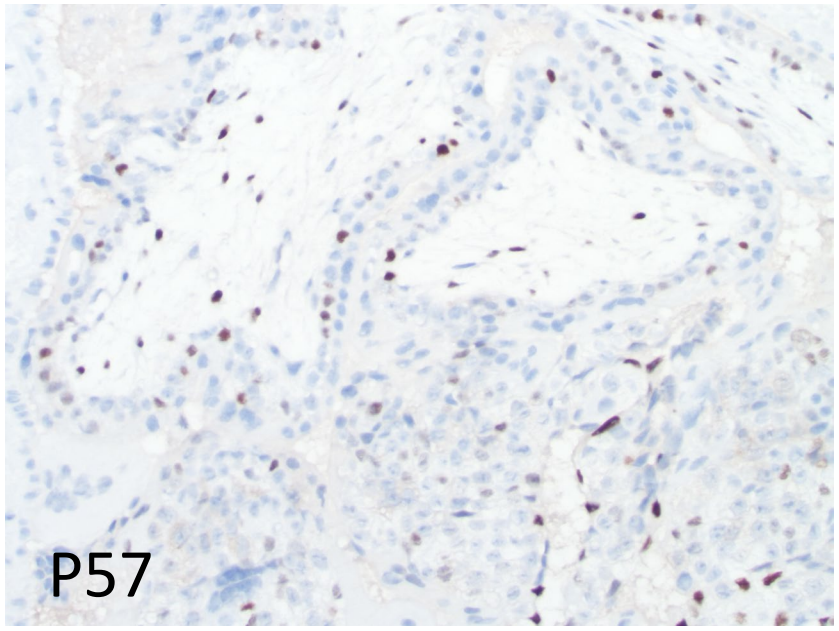






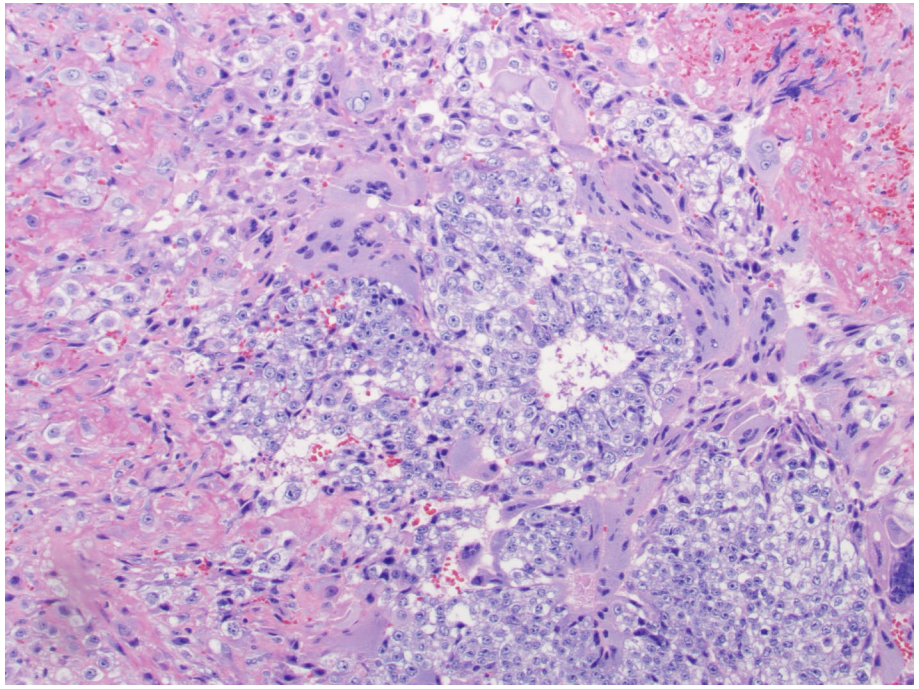

Villi in vascular spaces

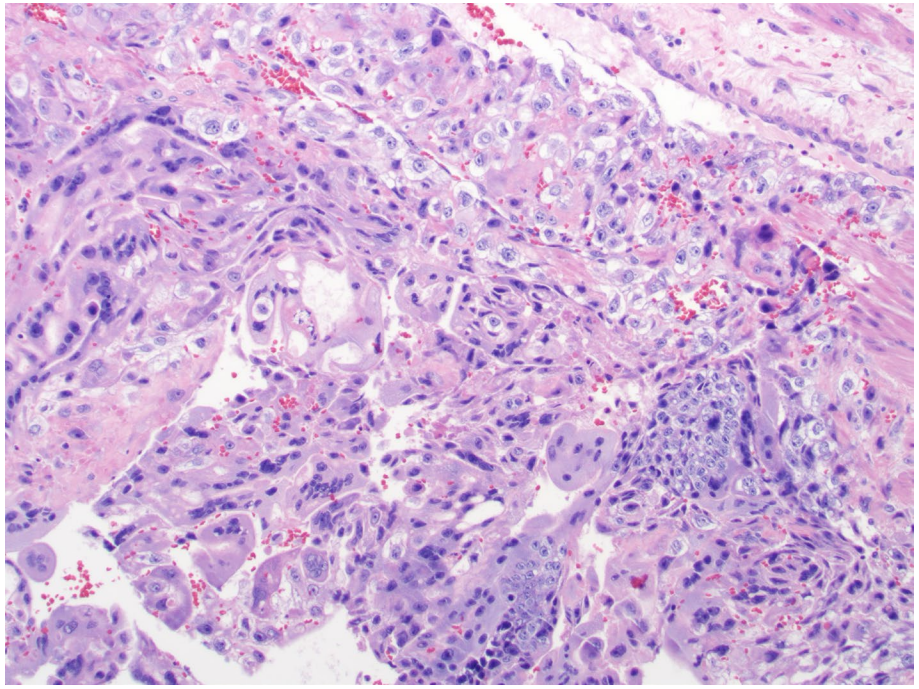


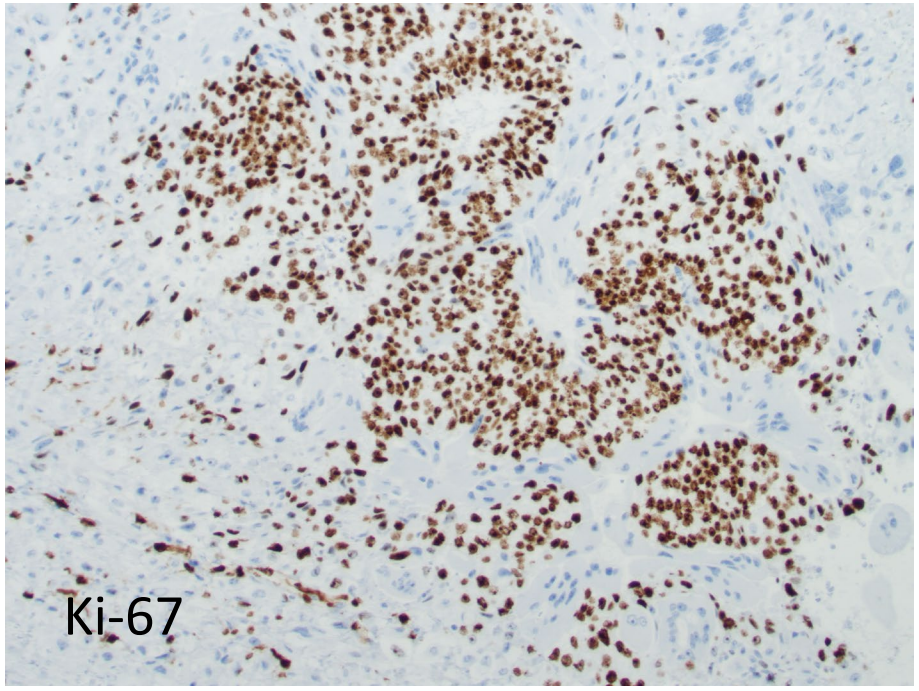

P57

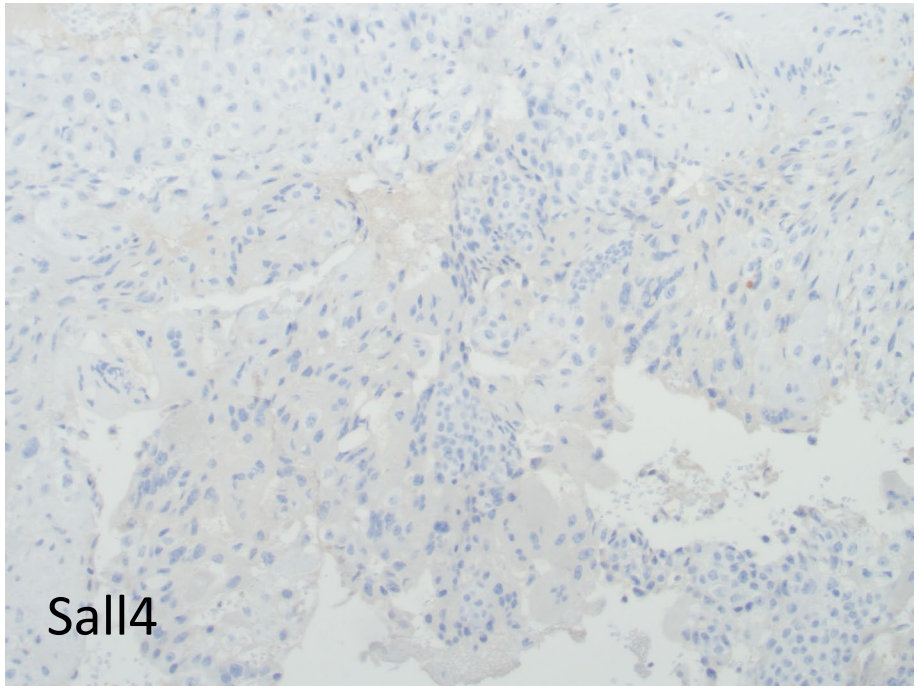
Differential diagnoses

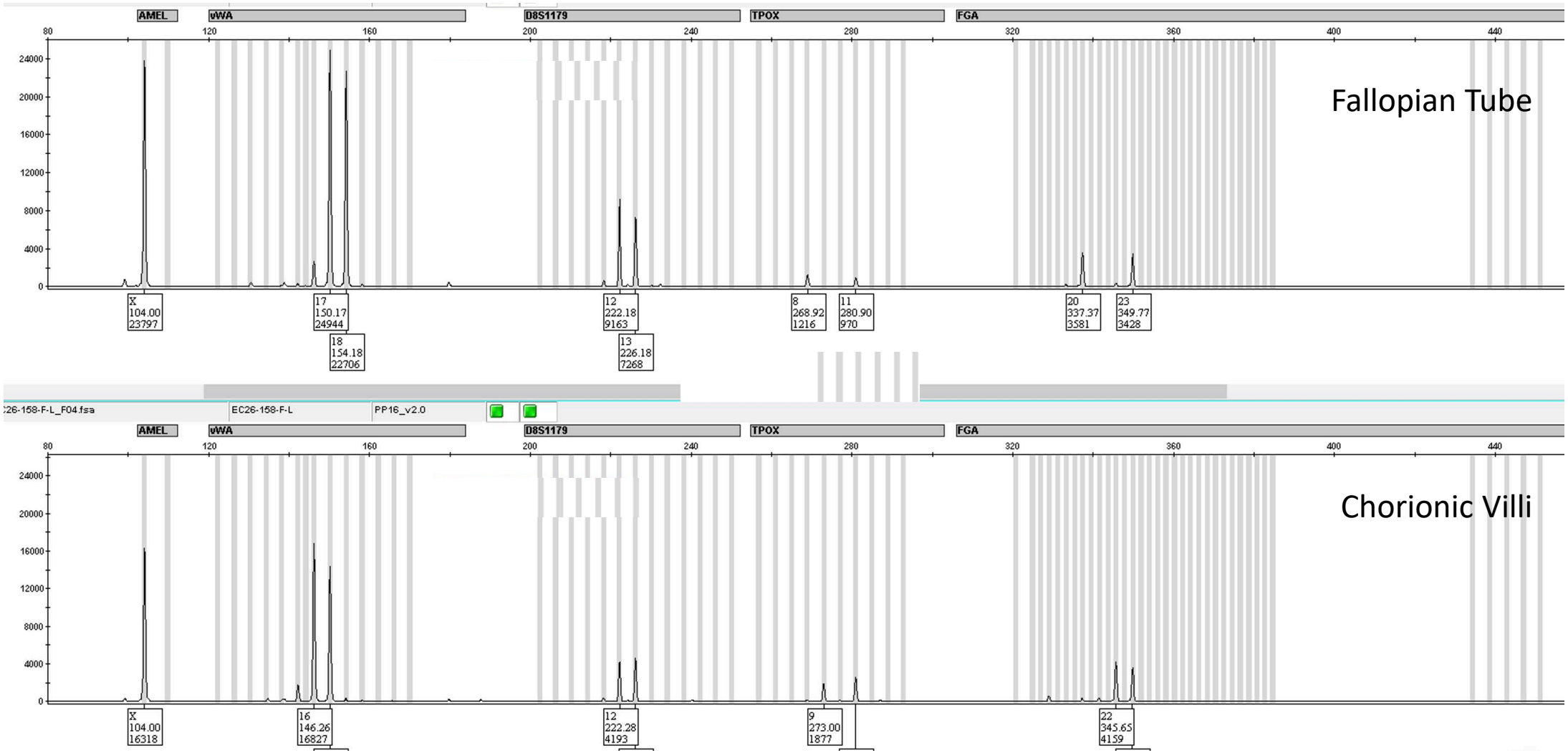
A. Tubal invasive CHM
B. Tube invasive PHM
C. Vascular displacement of ectopic villi
D. Tubal choriocarcinoma






Ki-67


Sall4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Chorionic Villi

Final Diagnosis: Tubal gestation with mechanical vascular displacement of chorionic villi

Discussion

Tubal pregnancies are frequently terminated at an early gestational stage and chorionic villi may exhibit irregular contours, hydropic change, primitive villous stroma, and prominent trophoblastic hyperplasia both within intervillous spaces and at the implantation site. These features can histologically mimic a hydatidiform mole (complete or partial) or even intramolar choriocarcinoma. In this case, foci of intravascular chorionic villi involve large-caliber vessels, raising concern for an invasive mole. However, retained (normal) p57 expression, absence of Sall4 staining, and a balanced biparental STR genotype support a non-molar gestation. Overall, the findings are consistent with a non-molar tubal gestation with mechanical displacement of chorionic villi into the tubal vasculature, likely due to surgical manipulation.