Ectopic pregnancy can be a life-threatening condition occurring in women all over the world. Over the past decades there has been a fluctuation in the incidence of the condition. This can be explained by factors like changing incidence of PID in the population, changing habits in contraceptive (IUD) use and increased diagnostic abilities. The clinical picture of ectopic pregnancy can be very individual and the doctor must therefore always have a high suspicion towards the diagnosis in a fertile woman, independent of symptoms.

The presenting signs and symptoms range from a completely asymptomatic woman to a woman presenting with an acute abdomen and shock. The symptoms most commonly reported are abdominal pain, vaginal bleeding or spotting and amenorrhoea can also be present.

The cornerstones in the diagnosis, together with history and physical examination, are ultrasound and hCG levels in serum. Despite the big progress in diagnosing the condition there can be cases where the physician will feel unsure about the diagnosis. Complication that we fear the most is rupture. It can lead to death. Since this is a outcome we don’t want, it is necessary to increase the awareness among doctors and nurses and always think of the condition when presented with a woman in her fertile age.