Cornual pregnancy may cause significant hemorrhage and hypovolemia and carry a mortality rate of 2 –2.5%. Traditionally, treatment of cornual pregnancy has been cornual resection at laparotomy or hysterectomy. Severe hemorrhage may occur during the operation therefore techniques to minimize blood loss are needed. The most common method is to inject vasopressin into the myometrium. Vasopressin is not approved and available worldwide. Besides, it provides a bloodless surgical field for a short time due to its relatively short half life. It may cause angina, myocardial infarction, hypertension and bradycardia.