

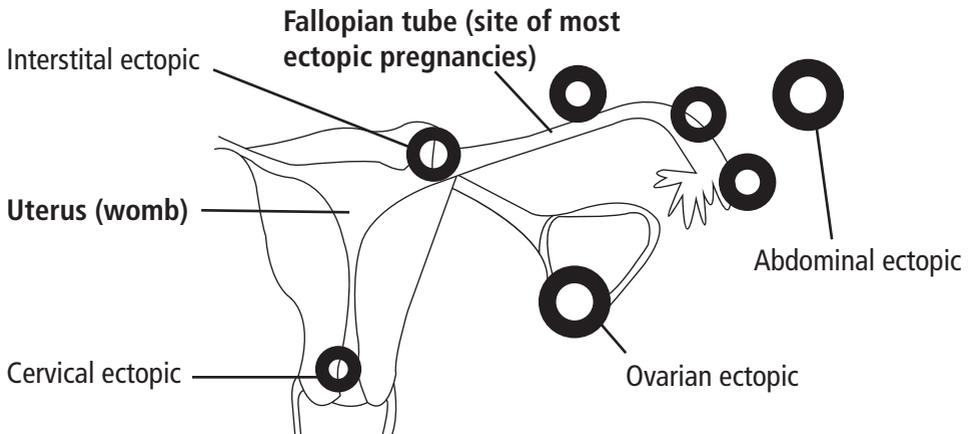
Medical management of your ectopic pregnancy



We are very sorry you have had an ectopic pregnancy diagnosed. We hope this information is useful for you during your treatment. It explains what will happen if you decide on medical management.

What is an ectopic pregnancy?

This is when your pregnancy occurs outside of your uterus (womb). This normally happens in the fallopian tube but may occur at other sites (see diagram).



How common is it?

Ectopic pregnancy occurs in 1 in 100 (1%) of all pregnancies.

Why does this happen?

Often the cause is not known, but if you have had damage to your Fallopian tubes (by previous pelvic infection or surgery) then ectopic pregnancy is more likely.

Is it possible to move an ectopic pregnancy into the uterus?

This has been tried, but unfortunately without success.

Is it dangerous?

Most of the time ectopic pregnancies can be treated safely. However, if not recognised or treated appropriately, it can be dangerous, causing internal bleeding.

How is it treated?

By close observation, injections of a drug, or surgery, depending on the stage of your pregnancy. This leaflet explains about medical treatment using methotrexate. Leaflets are also available explaining the other treatment methods.

What is methotrexate?

This is a drug given to stop your pregnancy growing any bigger and damaging your Fallopian tube further. Methotrexate has been extensively used to treat ectopic pregnancies with a good safety record.

What are the side effects?

The most frequent side effect is crampy tummy pains. This occurs in two out of three women. You can take the pain killers we've given you from the clinic, but if the pain is severe or you are feeling light headed or dizzy or worried, please telephone the ward on the number below. Other side effects include sickness and skin rashes. Sometimes methotrexate can make your skin more sensitive to the sun, so if it is summer use sunblock on exposed skin or cover up.

How many injections of methotrexate will I need?

You will usually only need one injection, but around one in 10 women will need two injections.

What happens to the pregnancy tissue?

It will get absorbed by your body.

How do I know the injections are working?

We need to take blood tests – initially four and seven days after the injection and then every week. If these show your Beta HCG hormone levels are going down, the treatment is working.

What is 'Beta HCG?'

This is the pregnancy hormone found in your blood (also called bHCG). The level of it can be measured and from this result, we know whether the treatment is working.

How long will it take for the ectopic to be fully treated?

This varies depending on how high your bHCG levels are and how your body responds to the treatment. It can take six to eight weeks for the bHCG levels to become undetectable.

What should I avoid whilst I'm having treatment?

We recommend that you avoid:

- alcohol
- vitamin preparations containing folic acid
- foods that cause gaseous tummy distension (bloating), such as cabbage and leeks

until the ectopic pregnancy has resolved.

We also recommend that you avoid sexual intercourse until your bHCG levels are negative.

How long does the bleeding last?

It is usual to have some vaginal bleeding. This may continue for a few weeks. It should get lighter, like the end of a period. Do not use tampons for the bleeding, just sanitary pads. It is normal to have some tummy cramps and even some small clots, but if:

- the bleeding becomes very heavy
- the pain becomes very severe, or
- you have an unpleasant smelling discharge

please let us know.

When will I get my next period?

Your periods should return within 4-6 weeks once follow up is complete, but this does vary.

What are the benefits of medical management of ectopic pregnancy?

- Methotrexate is a safe and effective treatment for ectopic pregnancy.
- Nine out of 10 women avoid an operation and anaesthetic.
- By avoiding surgery, your fallopian tube won't be removed and we hope this increases the chance of future pregnancies.

What are the risks of medical management of ectopic pregnancy?

- For one in 10 women it doesn't work and they need an operation - which may be as an emergency.
- There are side effects of the medication as listed above.
- You may get pain in your tummy which may mean coming into hospital for assessment and observation - this is the case for three to four in 10 women.
- Follow-up can be more prolonged than surgical management as you need weekly blood tests until bHCG is undetected.

What are my chances of getting pregnant again?

This depends upon how much the ectopic pregnancy has damaged your Fallopian tube and whether your other tube is damaged. Without doing further tests we cannot be absolutely sure, but overall, the chances are about 2 in 3 of having a pregnancy in the right place.

When can I try again?

There is no 'right' time to start trying again, but we advise waiting at least three months after the last injection of methotrexate before trying again, otherwise it may be harmful to a future pregnancy. It is important to use contraception to avoid getting pregnant during this time as it is possible to conceive again straight away.

Will it happen again?

There is a 1 in 10 chance of having another ectopic pregnancy. Stopping smoking and reducing your alcohol intake both increase your chances of having a healthy pregnancy. If you are trying to conceive you should take folic acid to reduce the risk of neural tube defects such as spina bifida.

What should I do if I get pregnant again?

In any future pregnancy, it is important that you have a scan early to make sure it's growing in the right place. As soon as you think you might be pregnant, make an appointment to see your GP, who will organise an ultrasound scan.

Contact us

If you have non-urgent questions please contact:

The Early Pregnancy Unit on 01872 252686

If you need urgent assistance

please contact Gynaecology ward on 01872 253163

Other sources of information and support:

The Ectopic Pregnancy Trust

Tel: 01895 238 025

www.ectopic.org

The Miscarriage Association

Tel: 01924 200799

www.miscarriageassociation.org.uk

**This leaflet was written and supported by
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If you would like this leaflet in large print, braille, audio version or in another language, please contact the General Office on 01872 252690

