



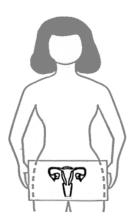
Ectopic Pregnancy

What is an ectopic pregnancy?

The normal place for a pregnancy to grow is inside the uterus. An ectopic pregnancy is one that develops outside of the uterus. The most common place for an ectopic pregnancy is in a fallopian tube. This may be called a tubal pregnancy. Other places for an ectopic pregnancy are the abdomen, ovary or top of the uterus.

uterus

This picture shows the uterus, ovaries and fallopian tubes.



fallopian tubes

ovaries

What risk factors may lead to an ectopic pregnancy?

The most common risk factors for an ectopic pregnancy are damaged fallopian tubes or tubal problems.

Some causes of tubal problems are:

- pelvic infection
- sexually transmitted infections
- endometriosis
- previous tubal surgery
- previous ectopic pregnancy

Up to 50% of women will have no risk factors and the cause of the ectopic pregnancy is not known.

What are the signs of ectopic pregnancy?

If you have an ectopic pregnancy you may have:

- an abnormal or missed period
- pain in your pelvic or abdominal area that may be on one side
- vaginal bleeding or spotting
- pain in the top of your shoulder

Sometimes it is hard to tell if you have an ectopic pregnancy. To be sure that the pregnancy is ectopic, you will need to have blood tests and an ultrasound examination.

How is an ectopic pregnancy treated?

An ectopic pregnancy must be ended because it can cause serious health problems. Surgery or medication may be used to end an ectopic pregnancy. Not all ectopic pregnancies can be treated with medication. Your doctor will discuss your treatment options with you.

Treatment with surgery

Before surgery, the doctor will talk with you about the type of surgery that is planned, and the risks and benefits of surgery. The nurse will help you learn what to expect and how to take care of yourself after surgery. The doctor and nurse will answer any questions that you may have.

You will have a general anesthetic, so you will not be awake or feel any pain during the surgery. During surgery, the doctor opens the fallopian tube and removes the pregnancy. If your fallopian tube cannot be repaired during surgery, it may need to be removed.

With laparoscopic surgery, the doctor makes 2 or 3 small incisions in the abdomen. A small amount of carbon dioxide gas is put into your abdomen through a needle. The gas expands and fills out your abdomen, making it easier to see inside. A thin, lighted telescope called a laparoscope is put into your abdomen through an incision. The surgeon can see your uterus, ovaries and fallopian tubes through the laparoscope. If you have this type of surgery, you will need to stay in hospital for 1 to 2 days.

In some cases the surgery cannot be done this way. The doctor needs to make one larger incision, just above the pubic bone. This is called a laparotomy. If you have this type of surgery, you will need to stay in hospital for 2 to 3 days.

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If you have surgery, it will take time for your body to heal. Your recovery will depend on the type of surgery that you had. Your nurse will help you learn:

- how to take care of your incision(s)
- what to eat and drink
- when to bath or shower
- what activities you can do
- how to manage pain or discomfort

Treatment with medication

Methotrexate is a medication which has been used for 40 years. It has been used to treat cancer, arthritis, psoriasis and other conditions. Methotrexate has been used to treat ectopic pregnancies for over 10 years. It is believed to prevent the growth of the embryo and placenta.

Your doctor will calculate the dose of methotrexate you need based on your height and weight. Methotrexate is usually given by a needle into the large muscles of your hip. It can also be given through an intravenous tube, called an IV. You may require a short stay in the hospital or you may be able to go home after the medication is given.

After the methotrexate is given, expect some vagional bleeding and cramping.

Side effects from methotrexate are usually mild and last only 1 or 2 days.

Side effects may include:

- nausea
- diarrhea
- headache
- vomiting
- sleeplessness
- mouth sores

The doctor will prescribe medication for pain and nausea.

A rare side effect is some hair loss, which is reversible. There is no evidence that this drug harms a future pregnancy.

Until your treatment with methotrexate is completed:

Do not drink alcohol or use any vitamins that have folic acid in them. This may decrease the effectiveness of methotrexate.

Do not have sexual intercourse.

Avoid the sun or use sunblock. Methotrexate may cause you to be more sensitive to the effects of the sun.

If the treatment is not successful, you may need to have surgery.

What can I expect during my recovery?

If your blood type is Rh negative, you will receive Rh Immune Globulin to prevent problems with future pregnancies. Your caregivers will give you more information before you receive this treatment.

After treatment for an ectopic pregnancy, you may need blood tests each week, for 2 to 6 weeks, to make sure your body is recovering well. Make sure that you have a follow-up appointment with the doctor. Talk with your doctor about your recovery and your plans for future pregnancies.

You may have feelings of grief or loss. Some women also feel sad, angry, or depressed. Sharing your feelings with your partner, a close friend or family member can help you cope with your loss. Your partner may have similar feelings and concerns.

If you need support to cope with your feelings, talk with your doctor or a counselor. If you stay in hospital, a social worker can speak with you or arrange a follow-up visit after you go home. You may decide to join a support group to share your experience and get help from others who have had a similar experience.

When to call the doctor

Call your family doctor or the doctor that treated your ectopic pregnancy if you notice ANY of these problems:

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Fever	Your temperature is 38°C (100°F) or higher.	
Vaginal flow	You have heavy bleeding – soaking a pad in 1 or 2 hours, or passing large clots (the size of an egg) from your vagina.	
	 There is a change in the discharge from your vagina. For example, it increases in amount, has a bad smell or that area is very itchy. 	
Incision	 Pain in your incision that does not get better with medication. 	
	 Your incision is bleeding, draining or coming open. 	
	 The skin around your incision is red or swollen. 	
Passing	 You have the urge to pass urine all the time. 	
urine	 You have trouble passing urine. 	
	 You have pain, burning or bleeding when you pass urine. 	
Abdomen	 You have trouble passing gas or having a bowel movement. 	
	 You have pain in your abdomen or feel sick to your stomach. 	
Other	You have pain or tenderness in your leg (thigh or calf) with swelling, redness or warmth.	
	You have trouble breathing, chest pain or cough up blood.	
	You have fainting or dizziness for more than a few seconds.	

If you have concerns, call your family doctor or the doctor that treated your ectopic pregnancy. Do not wait for an appointment. If you are unable to reach the doctor, go to an urgent care centre or the nearest emergency department that serves adults.



Problems marked with this sign are emergencies. Call 911 or go to the nearest emergency department that serves adults.

Urgent and Emergency Care in Hamilton

	Urgent care	Emergency care
	Open 8 am to 10 pm, 7 days a week	Open 24 hours a day, 7 days a week
NE	 St. Joseph's Healthcare Hamilton (King Campus) 2757 King Street East, Hamilton Main Street West Urgent Care Centre 690 Main Street West 	 All ages: Juravinski Hospital 711 Concession Street Hamilton General Hospital 237 Barton Street East St. Joseph's Healthcare Hamilton (Charlton Campus) 50 Charlton Avenue East
	NEW!	Children ages 17 and under ONLY McMaster University Medical Centre 1200 Main Street West