

MEDICAL MANAGEMENT OF AN ECTOPIC PREGNANCY

This treatment has been introduced into the clinical practice to avoid surgery, but requires careful follow-up. The follow-up means attending for blood tests 4 and 7 days after the treatment and thereafter once or twice weekly until the tests are negative. The schedule of blood tests will be explained to you by the doctor. The treatment has a 90% success rate.

Methotrexate is the drug used to “dissolve” the pregnancy. It is given by injection in the leg or buttock. Methotrexate is also extensively used for a variety of clinical conditions such as psoriasis and some malignancies.

Side effects of the drug are minimal but may include nausea, vomiting and a sore mouth. During treatment you should avoid: alcohol, folic acid containing vitamins, aspirin, non-steroidal medications like Ibuprofen.

Before the injection is given to you, you will have some blood tests to ensure you are suitable for the treatment. Again at the end of the first week blood tests will be repeated. If the levels of the pregnancy hormone are not falling, you may need a further scan and treatment. This is why we need to see you until the hormone levels are negative.

The main worry with ectopics is that they may rupture and bleed. This risk exists while the pregnancy hormone persists in the blood. When all of the placental tissue is dissolved the level of the hormone (BHCG) will return to normal. It is very important, therefore, that you come for regular blood tests. If you develop any sharp pains or an increasing discomfort in your abdomen you should immediately phone the Early Pregnancy Assessment Unit or the Emergency Room if the Unit is closed.

However, please remember that it is likely that the pain may get a little worse in the first week after the injection. As the pregnancy dissolves and the hormone levels fall you will get some vaginal bleeding like a period.

You should avoid pregnancy for three months after the completion of the treatment and follow-up therefore you should use reliable barrier or hormonal contraception. The risk of ectopic pregnancy is generally 1% and the risk of a repeat ectopic pregnancy is 1 in 10. However, remember that you still have a much greater chance of having a normal healthy pregnancy.

In your next pregnancy your GP will be able to refer you to the Early Pregnancy Assessment Unit after confirmation of pregnancy.

It is entirely normal to feel helpless, isolated and angry. Depression, guilt and self-blame are very common emotions after the loss of a baby. As time passes, you will

be able to deal with your loss more positively. You may find that you are ready to get on with your life quite quickly. Your partner may find it difficult to express his feelings. He may well feel that he should be strong and protect you from any more distress. If this is the case, you will need to encourage him to talk to you about his feelings. Sharing each other's feelings can be very helpful.

Allow yourself time to recover physically and emotionally before trying for another baby. If you need any further information or advice please do not hesitate to ask the staff.

- **Early Pregnancy Assessment Unit**
 - Opening hours Monday until Friday 9am until 4pm
 - Tel: 01-4085732
- **Emergency Room**
 - Tel: 01-4085216