

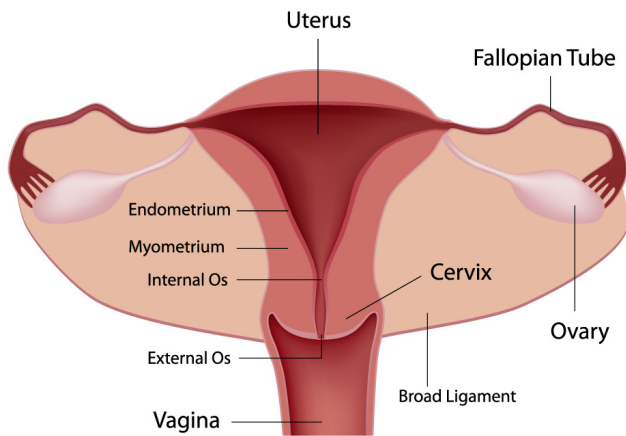


Ectopic Pregnancy

What is an Ectopic Pregnancy?

An ectopic pregnancy occurs when a fertilized egg (embryo) grows outside the uterus. Most ectopic pregnancies happen in the fallopian tube, but they can also rarely occur in the ovary, the abdomen or the cervix.

Female Reproductive System



That hormone test is call β -hCG (pronounced beta H,C,G). You will also need an ultrasound. The time to do the ultrasound will depend on the level of hormone β -hCG or how far along you are in the pregnancy. The ultrasound is usually a vaginal ultrasound (internal ultrasound). This is not a painful examination.

If the β -hCG level is higher than 2000 IU/L, we expect to see a gestational sac (place where the baby will develop) in the uterus (womb) when a vaginal ultrasound is done. If the ultrasound does not show the pregnancy in the uterus, it likely means that it is in the fallopian tube (ectopic). Your doctor will review all of this with you.

Don't hesitate to ASK QUESTIONS. It is important that you understand what is happening.

How Do I Know I Have An Ectopic Pregnancy?

The diagnosis of ectopic pregnancy is suspected if:

- You are pregnant
- **And** have some bleeding
- You may or may not have pain

Not all pregnant patients who have bleeding or pain have an ectopic pregnancy. You will need additional tests.

What Tests Do I Need?

Your doctor will want to do some tests to determine if the pregnancy is growing in the uterus (normal):

You will likely need one or more blood test (s) to check the hormone level produced by the pregnancy.

My notes:

My questions:

How Do We Treat An Ectopic Pregnancy?

Your doctor will explain the choices available to you. Although we will always take your wishes into consideration, there are times when some options are not safe.

If left alone (no treatment), an ectopic pregnancy can rupture and create internal bleeding. This is a serious and life threatening emergency.

1. Medical Treatment (Methotrexate)

Methotrexate is a drug used to treat ectopic pregnancies as well as certain types of joint pains (arthritis) and cancer. It works by stopping the growth of the pregnancy cells. This medication is given as an injection (needle) into your muscle. You will be going home shortly after you receive your injection. In most cases, a single injection will treat the ectopic pregnancy. Occasionally, a second dose may be required.

You may be a candidate for this treatment if:

- You have very little or no pain
- Your vital signs are normal (pulse and blood pressure)
- The level of β -hCG level is <5000IU/L
- The size of the ectopic pregnancy is small and they did not see a fetus (baby) in the tube
- You are **available and committed to come back** to either the Early Pregnancy Assessment Clinic (EPAC) or the Rapid Access Gynecology Clinic (see map and phone number at the back of this brochure) at Vancouver General Hospital (VGH) for medical visits (usually 2 or 3 visits)
- You are **available and committed to have regular blood tests** to measure the β -hCG levels until the levels are 0 (which may take as long as 1 to 2 months)

Depending on the level of your β -hCG, you may be treated in the EPAC clinic, or we may refer you to the Rapid Access Gynecology Clinic at VGH for further care. Like with any other medication, there are possible side effects with the methotrexate. Some of the potential side effects are nausea, vomiting and ulcers in the mouth (extremely rare).

2. Surgical Treatment

The surgery is usually performed by laparoscopy. This means having a general anesthetic (going “to sleep”). The gynecologist will make 3 or 4 dime size incisions (cuts) on your abdomen and insert a small camera. Usually the pregnancy is removed from the fallopian tube (salpingostomy). In a few cases, the entire fallopian tube may need to be removed. You will be going home the day of your surgery or the day after.

On occasion, the surgery will need to be performed through a bigger incision. This is called a laparotomy. Your hospital stay will be longer, usually 2-3 days.

Are There Other Risks?

Even if you have been treated for your ectopic pregnancy, there is always a very small chance of severe internal bleeding. You should go to the Emergency Department if:

- You suddenly feel faint or feel like passing out (loss of consciousness)
- You suddenly have severe pain in your abdomen
- You suddenly have severe pain at the top of your shoulder(s)

What Happens After My Treatment (Follow-Up)?

If you have been treated with **METHOTREXATE**, you will need:

- **β -hCG level on day 4** after your injection
- **β -hCG level on day 7** after your injection
- **β -hCG level done every week after that, until the level is 0.** The doctors will review your results every week. You will receive a phone call after that to tell you what to do.

If you have been treated with **LAPAROSCOPY** and your tube was **NOT** removed (salpingostomy) you will need:

- **β -hCG level on day 7** after your surgery
- **An appointment for a visit on day 7 after your surgery at the Rapid Access Gynecology Clinic** (see map and phone number at back)

- β -hCG level done **every Wednesday after that, until the level is 0**. The doctors will review your results every Thursday afternoon. You will receive a phone call after that to tell you what to do.

What Else Do I Need To Know?

Some important things to remember:

- Avoid sexual intercourse until your β -hCG level is 0
- If you have severe pain or feel like fainting, go to the nearest Emergency Department
- If you have any questions, write them down and bring them with you at your next visit
- Make your appointment for day 7 post treatment

If you have received **METHOTREAXATE**:

- Avoid alcohol
- Avoid gas producing food (so that you don't have more bloating and pain)
- Avoid sun exposure
- Expect some pain in your abdomen 2 to 7 days after your injection. This should **NOT** be severe and should get better with Acetaminophen (Tylenol) or Ibuprofen (Advil or Motrin)

Can I Have Another Pregnancy?

Your risk of having another ectopic pregnancy is higher because you already had one ectopic pregnancy. We suggest that you do a home

pregnancy test as soon as your period is late (you can buy a test at any drugstore). If it is positive, your β -hCG levels will need to be tested as outlined on Page 2 of this booklet. Contact your doctor or the EPAC as soon as your home pregnancy test is positive so that we can arrange an early ultrasound. This is important to make sure the pregnancy is growing in the uterus, not the fallopian tube.

When Can I Try To Get Pregnant Again?

You should discuss this with the doctor in the clinic at your visit 1 month after your treatment. Generally, we will tell you to try once your β -hCG level is 0 and you have had one normal period.

Review the information in this brochure often, so that you are very familiar with what is happening to you. Keep this booklet with you and carry it around. When you see a doctor at our clinic or elsewhere, show them your diary so that they can see what has been happening and can add notes too. Some patients may require additional tests before they try to get pregnant again.

Rapid Access Gynecology Clinic Gordon and Leslie Diamond Health Care Centre

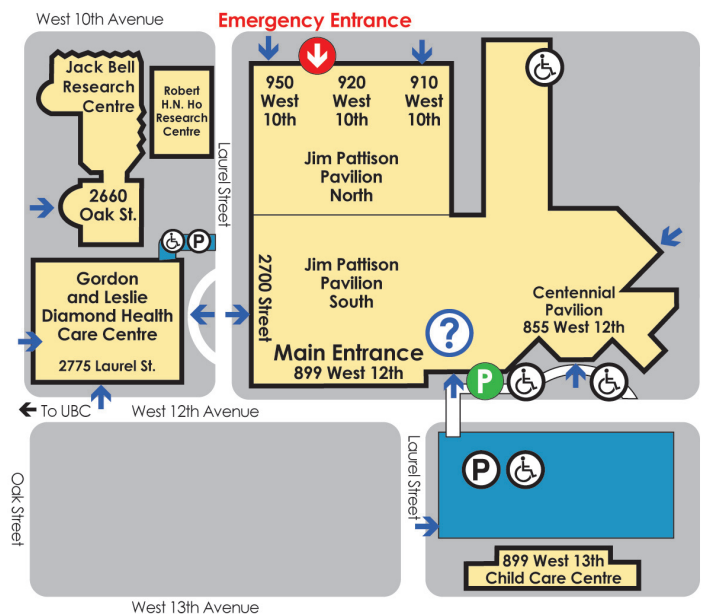
6th Floor Gynecology - 2775 Laurel Street,
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Tel: 604-875-4111 local 69722

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Emergencies Only: call 604-875-4111 and ask operator to page the Gynecology resident on call

<http://www.bcwomens.ca/Services/HealthServices/reproductivemedicine/earlypregnancy.htm>



Keep a Record of Your Blood Tests Results, Ultrasounds, Visits, and Treatments

Date					
β -hCG					
Ultrasound					
Visit					
Treatment					
Comments					