

**Patient
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Treatment of an ectopic pregnancy with methotrexate

Introduction

This leaflet gives you information about treating an ectopic pregnancy with methotrexate.

What is methotrexate?

Methotrexate is a medicine that stops a pregnancy from growing and is given to patients to end a pregnancy when it is ectopic (growing outside of the womb).

When may I be offered methotrexate?

If you have a positive pregnancy test and the pregnancy hormone is above a certain level but an ultrasound scan shows there is no pregnancy inside your womb, this may mean you have an ectopic pregnancy. Methotrexate treatment can be thought about if you have no pain, your medical condition is stable and the pregnancy is not too far advanced.

What does the treatment involve?

Tests will be carried out to find out if your liver and kidneys are working normally. If they are, the methotrexate will then be given as a single injection into a muscle, usually in your upper thigh or buttock. Some patients may need a second injection 1 to 2 weeks later if the pregnancy hormone level does not fall fast enough.

Will I need to stay in hospital?

You will need to stay in hospital for 1 hour after the injection. It is very important that you return for regular follow-ups so that we can check that the treatment is working. We will tell you when to come in for your first follow-up appointment after you have had treatment. At each visit, you will be asked how you are feeling and if you have any abdominal pain.

Reference No.

GHPI0975_01_19

Department

Gynaecology

Review due

January 2022

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A blood sample will be taken to check your pregnancy hormone level and that your liver and kidneys are working normally. The appointments will be every 4 days during the first 10 days. After this, if the pregnancy hormone level is falling at a good rate, the follow-ups may be changed to once a week.

How long will I need to keep visiting the hospital?

This will depend upon how quickly your hormone level falls. It usually takes between 3 to 8 weeks to fall to a normal level, but if the first test after the injection shows a high hormone level, it may take longer overall (up to 90 to 120 days following treatment).

At each visit, you will be told when to come in for your next follow-up.

Please contact Ward 9a if you are worried about severe lower abdominal pain, pain which does not go away, heavy vaginal bleeding or if you have any other concerns. The contact details are at the end of this leaflet.

If you are worried about your symptoms, go to your nearest Emergency Department.

Do I need to take any special precautions?

We advise you not to have sexual intercourse during treatment and the follow up period. Alcohol should also be avoided during the first week following treatment and possibly longer. We will advise you about this.

You must avoid taking extra vitamins such as folic acid and non-steroidal drugs such as ibuprofen, aspirin and diclofenac such as Voltarol®, until your hormone levels have gone back to normal. If you are unsure, please call the numbers at the end of this leaflet for advice.

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Many patients (60 in 100) develop some lower abdominal pain 3 to 7 days after the injection. This can be reduced by taking pain relief medication such as paracetamol.

Less common problems are feeling sick, diarrhoea, soreness or ulcers in the mouth and nose bleeds. There is a risk of prolonged bleeding.

Will I still need an operation?

The aim of the treatment is to resolve the ectopic pregnancy without an operation. However, this is not always possible even when the hormone levels are falling steadily.

If internal bleeding happens from the pregnancy or if the pregnancy is increasing in size as measured by the ultrasound scan, then an operation will still be necessary.

Studies have reported that approximately 14 in 100 women will need more than 1 dose of methotrexate and less than 1 in 10 of women treated will require an operation to resolve the ectopic pregnancy.

Will I need any further investigations?

The need for further investigation is unlikely.

When can I try for another pregnancy?

The usual recommendation is to wait for 3 months if you have had 1 injection of methotrexate, before trying for another baby. You should use your usual method of contraception during this time. If you have had 2 injections, you should wait for 6 months before trying for another baby. This is important as it will make sure that any traces of methotrexate are gone from your system.

Once the pregnancy hormone level is less than 5, we advise you to take 5 milligrams of folic acid until the 13th week of your pregnancy.

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What is the chance of a successful pregnancy next time?

The chance of becoming pregnant again is as high as 80 in 100 if you have not had fertility problems before. However, not all these pregnancies will be successful, as some may end in a miscarriage.

Some women may experience another ectopic pregnancy however the majority of women will have a normal pregnancy (inside the womb) regardless of the type of treatment that they received.

It is expected that 11 in 100 of later pregnancies will be outside the womb. When you become pregnant next time, it is recommended that you have an early pregnancy scan at around 6 weeks to exclude the possibility of another ectopic pregnancy.

Can the treatment harm any of my future babies?

There is no evidence to show that methotrexate causes any problems to future pregnancies.

Contact information

If you are worried about severe or continuing lower abdominal pain, heavy vaginal bleeding or if you have any other concerns please contact Ward 9a.

Ward 9a

Gloucestershire Royal Hospital
Tel: 0300 422 6668

The ward staff will contact the on call Gynaecology Registrar or Senior House Officer who will then return your call.

Further information

The Ectopic Pregnancy Trust
483 Green Lanes
London
N13 4BS

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Tel: 020 7733 2653

Website: www.ectopic.org.uk

Other written information is available from the hospital. Please ask your nurse or doctor if you would like a copy the leaflet GHPI0770 Ectopic pregnancy.

Content reviewed: January 2019