

Ectopic Pregnancy

Pregnancy that occurs OUTSIDE THE UTERUS is known as ectopic pregnancy. It is important to identify this condition at the earliest so as to prevent the possible complications .

In order to understand this subject we take these 3 issues:

- Symptoms of ectopic pregnancy
- > How it is diagnosed
- > How it may be treated

About Ectopic Pregnancy

Almost all ectopic pregnancies occur in a fallopian tube. Rarely, it will attach to an **ovary** or another organ in the abdomen. As the pregnancy grows, it can cause the tube to rupture (burst). If this occurs, it can cause major internal bleeding. This can be life threatening and needs to be treated with surgery.

Sometimes, if the tube has not ruptured, there is a small possibility of treating by giving medicines and injections. If the tube has ruptured, the surgery becomes necessary.

Who is at Risk?

Any sexually active woman of child bearing age is at risk for ectopic pregnancy. In the past two or three decades, ectopic pregnancy has become more common. Today, about 1 in 50 pregnancies is ectopic. Women who have abnormal fallopian tubes are at higher risk for ectopic pregnancy. Abnormal tubes may be present in women who have had the following conditions:

- > Pelvic inflammatory disease (an infection of the uterus, fallopian tubes, and nearby pelvic structures)
- Previous ectopic pregnancy
- > Infertility
- Pelvic or abdominal surgery
- Endometriosis
- Sexually transmitted diseases
- Prior tubal surgery (such as tubal sterilization)



Some of these conditions produce scar tissue in the tubes. This may keep a fertilized egg from reaching the uterus.

Other factors that increase a woman's risk of ectopic pregnancy include:

- cigarette smoking
- > increased age

Symptoms and Diagnosis

The symptoms of ectopic pregnancy sometimes include the symptoms of pregnancy, such as tender breasts or an upset stomach. Some women may have no symptoms at all. They may not even know that they are pregnant. If ectopic pregnancy is found early, it can be treated before the tube ruptures. Ectopic pregnancy may cause the following symptoms:

- Abnormal vaginal bleeding. Bleeding that is not at the time of your normal menstrual period is called abnormal vaginal bleeding. It may be light or heavy.
- > Abdominal or pelvic pain. This can be sudden and sharp and ache without relief or seem to come and go. It may occur on only one side.
- > Shoulder pain. Blood from the ruptured tube can build up under the diaphragm (the area between your chest and stomach). This can cause pain that is felt in the shoulder.
- > Weakness, dizziness, or fainting. This can happen because of blood loss.

These symptoms can occur before you even suspect you are pregnant. If you have these symptoms, call your doctor.

If your doctor suspects that you may have an ectopic pregnancy, he or she may

- > perform a pelvic exam
- > check your blood pressure (low blood pressure may mean internal bleeding) and pulse
- perform an ultrasound exam (a test in which sound waves are used to create an image) to see if there are early signs of a pregnancy
- ➤ blood test called Serum beta HCG may be required in certain cases

This blood test takes some time and may need to be repeated. However, if your doctor suspects that you have an ectopic pregnancy that has ruptured, it is an emergency. You will need to have surgery right away. If the pregnancy is still in the



early stages and the tube is not in danger of rupture, medical treatment may be an option.

Treatment

There are two methods used to treat an ectopic pregnancy: medication and surgery. If your doctor thinks you have an ectopic pregnancy, he or she will discuss the best treatment based on your medical condition and your future plans for pregnancy.

Medication

If the pregnancy is small and has not ruptured a tube, sometimes medicines can be used instead of surgery to treat ectopic pregnancy. Medication stops the growth of the pregnancy and permits the body to absorb it over time.

The most common drug used to treat ectopic pregnancy is methotrexate. It also often is used to treat cancer. This drug stops cells from growing, which ends the pregnancy. The ectopic pregnancy then is absorbed by the body.

There are many factors that go into the decision to use methotrexate. It cannot be used for women who are breast-feeding or have certain health problems.

Methotrexate: Methotrexate can be given often is given by injection. In some cases, it may be given in many doses over several days. After treatment, it takes about 4–6 weeks for the pregnancy to be absorbed.

For this treatment, your doctor will take a sample of your blood. Blood tests will be done to measure the functions of certain organs, as well as the level of HCG. After receiving the injection, levels of HCG will most likely increase until about the fourth day; then, they should decrease. On the seventh day, the doctor looks for a decrease in the HCG levels from day 4. If levels have not decreased enough, your doctor may have to recheck the ectopic pregnancy on sonography and may need to suggest surgery or another dose of methotrexate.

Risks and Side Effects



While you are taking methotrexate, you will be checked closely. Careful follow-up over time (about 30 days) is needed until hCG is no longer found in your blood.

During and after this treatment, you should avoid

- > alcohol
- > vitamins containing folic acid
- > nonsteroidal anti-inflammatory drugs (NSAIDS), such as ibuprofen
- > sex

Talk to your doctor about when it will be safe to resume having sex and using these substances.

Medical treatment of an ectopic pregnancy can have some side effects. Almost two thirds of the patients have abdominal pain. Vaginal bleeding or spotting also may occur. Other side effects from the drug may include

- > nausea
- vomiting
- > diarrhea
- dizziness

The risk of tubal rupture does not go away while you are taking methotrexate. See your doctor right away if you have any of the following symptoms:

- > Sudden, severe abdominal pain
- > Major increase in abdominal pain
- Heavy vaginal bleeding
- > Dizziness, fainting, or rapid heartbeat

Surgery

Ruptured ectopic pregnancy can get operated through a small incision on the abdomen. It is usual practice to keep some blood ready and cross matched because woman might have lost significant amount of blood by then and may need a transfusion. If the tube is ruptured, then there is a need to remove the tube completely or partially. The surgeon takes this decision depending upon the condition in the abdomen.

This surgery can also be performed using laparoscope. Your doctor will decide which method of surgery is best suited for you and decide accordingly.



There is a good chance that you can have a normal pregnancy in the future. Once you have had an ectopic pregnancy, though, you are at higher risk for having another one.

After an Ectopic Pregnancy

Emotional healing after a pregnancy loss is as vital as physical healing. Grieving helps you to deal with this painful loss. Counseling may be helpful to both you and your partner. Allow enough time for physical and emotional healing before trying to get pregnant again. Your doctor can give you some guidelines.

Remember

Although an ectopic pregnancy can threaten your health and well-being, prompt treatment and follow-up care can help prevent complications. If you have any of the symptoms of ectopic pregnancy, see your doctor for treatment. It is best to find an ectopic pregnancy early and treat it before serious problems occur.