

Plain language summary

The Diagnosis and Management of Ectopic Pregnancy

Who is this summary for?

This summary is relevant to all women and their partners who are diagnosed and treated for an ectopic pregnancy.

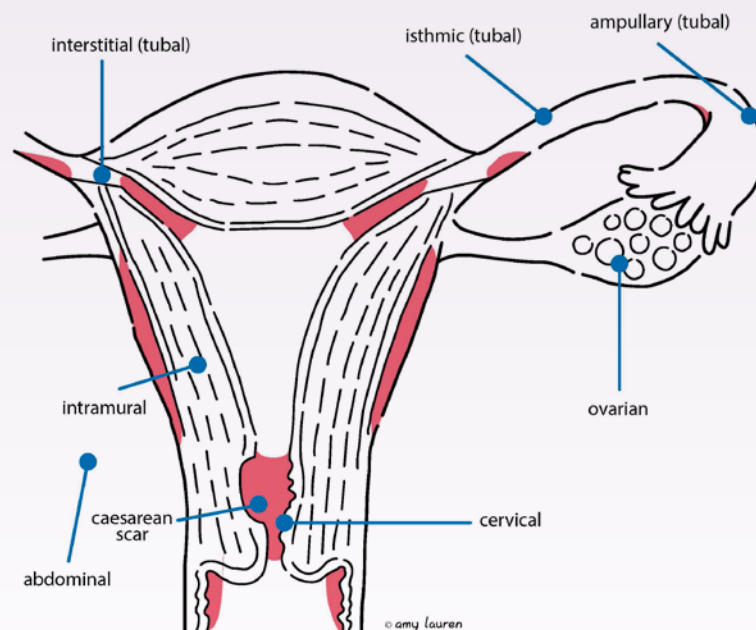
What is this summary about?

The National Women and Infants Health Programme (NWIHP) recently updated the National Clinical Practice Guideline (CPG) on ectopic pregnancy. This CPG is for healthcare professionals who care for women in pregnancy and covers all aspects of care for women with an ectopic pregnancy. The purpose of this plain language summary (PLS), using non-medical terminology, is to provide an overview of the national CPG. This summary focuses on tubal ectopic pregnancy.

What is an ectopic pregnancy?

An ectopic pregnancy happens when a fertilised egg implants in the wrong place, usually but not always, in the fallopian tube. This occurs at the very start of pregnancy. The picture shows the locations where an ectopic pregnancy can form.

Types of ectopic pregnancy



<https://www.hse.ie/eng/about/who/acute-hospitals-division/woman-infants/clinical-guidelines/>

<https://www.rcpi.ie/faculties/obstetricians-and-gynaecologists/national-clinical-guidelines-in-obstetrics-and-gynaecology/>

Why does an ectopic pregnancy happen?

When the ovary releases an egg it travels along the fallopian tube where it meets sperm and is fertilised. The fertilised egg then should move into the womb and implant there. If the fertilised egg implants in the wrong place it is an ectopic pregnancy.

There are a number of factors which increase a woman's risk for an ectopic pregnancy.

- Damaged fallopian tubes
- Previous pelvic infection
- Assisted fertility treatment such as IVF
- Smoking
- A previous ectopic pregnancy
- An intrauterine contraceptive device
- Endometriosis

One in two women will have no risk factors for ectopic pregnancy.

What are the symptoms of an ectopic pregnancy?

Symptoms of ectopic pregnancy can vary between women. Symptoms include pain in the lower stomach, vaginal bleeding, diarrhoea or vomiting, dizziness or collapse.

How does ectopic pregnancy affect the woman and the pregnancy?

An ectopic pregnancy cannot survive as it is not in the right place to develop. Ectopic pregnancy can be life threatening as the growing pregnancy can rupture and cause serious internal bleeding.

What tests are available to diagnose an ectopic pregnancy?

An ectopic pregnancy can be diagnosed quickly in some women however in others it can take up to a week or more. Tests that are used include a urine pregnancy test, blood tests for pregnancy hormone levels and ultrasound scans. These tests usually take place in the hospital's early pregnancy unit or clinic.

What is the treatment for an ectopic pregnancy?

Treatment for an ectopic pregnancy varies and will depend on a number of factors.

These factors include:

- How many weeks pregnant the woman is
- What size the ectopic pregnancy is
- What symptoms the woman has
- Results of ultrasound and blood tests
- Changes in pregnancy hormone levels over days

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Women should be counselled about the different treatment options, their success rates and complications, and the need for further or follow up treatment.

The three options for treatment for a diagnosed ectopic pregnancy are:

1. Expectant management - a 'wait and see' approach.
Women will need to monitor symptoms and attend the hospital for blood tests until pregnancy hormone levels return to normal.
2. Medical treatment with an injection called methotrexate which stops the pregnancy growing.
Women will need to monitor symptoms and attend the hospital for blood tests until pregnancy hormone levels return to normal.
After this type of treatment, women are advised not to get pregnant again for 3 months.
3. Surgery to remove the ectopic pregnancy.
This is usually keyhole-type surgery and most commonly involves removing the tube where the pregnancy is located.

What is the follow-up care after an ectopic pregnancy?

Women who have had surgery for ectopic pregnancy should have a follow-up visit in the hospital 6-9 weeks after the procedure. Routine follow up for all women regardless of type of treatment should be available, and this is also an opportunity to discuss future pregnancy planning.

Women should be aware that the recurrence risk of ectopic pregnancy is around 15%. They should be offered an early pregnancy scan at 6 weeks in a future pregnancy.

Where to go for more information?

HSE website <https://www2.hse.ie/conditions/ectopic-pregnancy/>

Ectopic Ireland. <https://www.ectopicireland.ie/medical-info>

National Institute for Health and Care Excellence. Ectopic pregnancy and miscarriage: diagnosis and initial management. <https://www.nice.org.uk/guidance/ng126>

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