Methotrexate to Treat Ectopic Pregnancy

What is ectopic pregnancy?

Ectopic [ek-TOP-ik] means “out of place” — and in an ectopic pregnancy, the fertilized egg has implanted outside the uterus (the womb). Most ectopic pregnancies occur in a fallopian tube, which is why they are sometimes called “tubal pregnancies.” But a fertilized egg can also settle in the abdomen (belly), cervix, or ovary.

An ectopic pregnancy won’t result in a live birth. Only the uterus has the right conditions and the space needed for the egg to develop normally.

Why is it important to treat ectopic pregnancy?

An ectopic pregnancy is extremely dangerous for the pregnant woman. As the fertilized egg grows, it will eventually rupture (break open) the organ that contains it. This can cause severe, life-threatening bleeding inside the abdomen.

How is ectopic pregnancy treated?

An ectopic pregnancy must be ended as soon as possible. It can be ended with a medicine called methotrexate [meth-oh-TREK-seyt] or through surgery.

When an ectopic pregnancy is discovered early (during the first 6 weeks) in the pregnancy and certain hormone levels are low, your healthcare provider will probably recommend methotrexate.

How does methotrexate work?

Methotrexate works by stopping the growth of the fertilized egg before a rupture occurs. Sometimes, methotrexate is combined with surgery to treat an ectopic pregnancy. In this case, the medicine removes fetal cells left behind after surgery.

How is methotrexate given?

To treat ectopic pregnancy, methotrexate is typically given as an injection (a shot) into a muscle. This often takes place in a hospital emergency room. In some cases, a second or third injection is necessary in the weeks after the first injection.
How do I care for myself after a methotrexate injection?

After your methotrexate injection, it’s important to:

- **Follow up with your doctor or midwife.**
  Your pregnancy hormone levels must be checked to ensure they are dropping. You may also need follow-up ultrasounds.

- **Avoid the following for 24 hours:**
  - Vitamins with folic acid (such as prenatal vitamins)
  - Alcohol
  - Penicillin (a common antibiotic medicine)
  - Pain relievers such as ibuprofen (Motrin, Advil) and naproxen (Aleve)
  - Any other substances, medicines, or activities that your doctor or midwife tells you to avoid

**When should I call my doctor or midwife?**

For the first 2 to 3 days after a methotrexate injection, you may have side effects from the medicine. Your side effects may be worse if you drink alcohol or take any of the other substances listed at left. Call your healthcare provider if you have ANY:

- Vaginal bleeding or spotting
- Nausea
- Fatigue or lightheadedness
- Cramping abdominal pain

**When should I call 911?**

Call 911 (or have someone drive you to the hospital emergency room) if you have ANY:

- Very heavy vaginal bleeding
- Severe abdominal pain
- Severe lightheadedness (dizziness)

Talking with your healthcare provider about methotrexate

The table below lists some potential benefits, risks, and alternatives for methotrexate treatment of ectopic pregnancy. Discuss these with your healthcare provider, and ask any questions you have.

<table>
<thead>
<tr>
<th>Potential benefits</th>
<th>Risks and potential complications</th>
<th>Alternatives</th>
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<tbody>
<tr>
<td>• Can end an early ectopic pregnancy without the need for surgery. Avoiding surgery may help preserve your fertility. • Can help remove remaining fetal tissue after a surgery to end ectopic pregnancy.</td>
<td><strong>More common:</strong> • Vaginal bleeding or spotting • Nausea • Fatigue or lightheadedness • Cramping abdominal pain <strong>Less common:</strong> • Skin sensitivity to sunlight • Inflammation of the membrane covering the eye • Sore mouth and throat • Temporary hair loss • Severe low blood cell counts • Inflammation of the lung (pneumonitis)</td>
<td>Surgery (using a laparoscopic approach or through an abdominal incision) **Although ectopic pregnancies can sometimes resolve on their own, a “watch-and-wait” approach is never recommended. An ectopic pregnancy poses great risk to the mother and should be treated as soon as possible after it is diagnosed.</td>
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