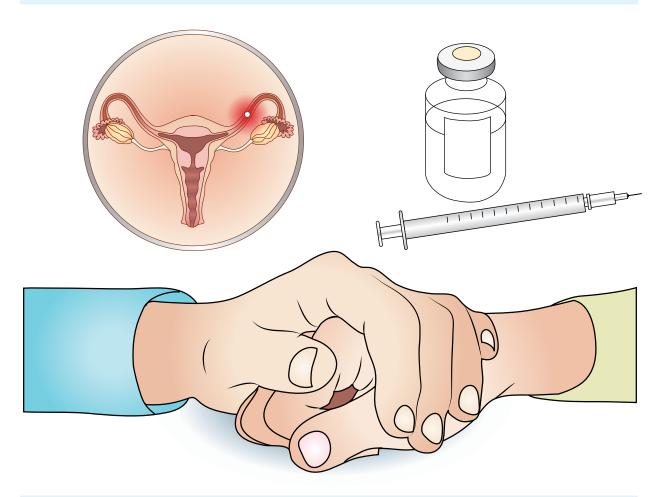
Methotrexate for Ectopic Pregnancy: What you need to know



Learning about an ectopic pregnancy can be difficult and stressful. We have created this booklet to help you and your family during this challenging time. It explains ectopic pregnancy and methotrexate medication. It also includes some resources that we hope will guide you along the road ahead.

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IMPORTANT: PLEASE READ

Information provided by this document is for educational purposes. It is not intended to replace the advice or instruction of a professional healthcare practitioner, or to substitute for medical care. Contact a qualified healthcare practitioner if you have any questions concerning your care.

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Office d'éducation des patients Patient Education Office

This material is also available on the site of the **MUHC Patient Education Office** www.muhcpatienteducation.ca

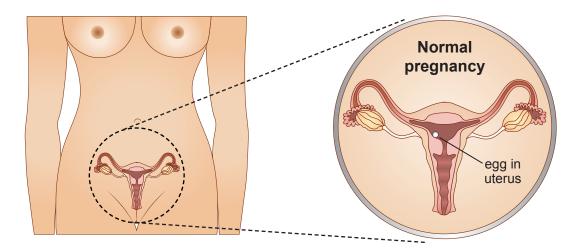


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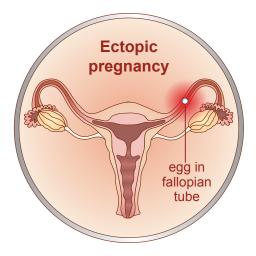
What is an ectopic pregnancy?

During pregnancy, the fertilized egg (or embryo) grows in the uterus (womb). In order for the egg to grow, the uterus lining grows thicker over time.



In an ectopic pregnancy, the egg grows outside the uterus. Most often, the egg grows in the fallopian tube. This type of ectopic pregnancy is often called a "tubal" pregnancy. An egg growing outside the uterus will not survive.

Each day the egg grows, your fallopian tube will stretch. This can cause pain. If left to continue to grow, your fallopian tube will eventually burst. You will then need an emergency surgery.



The good news is that it is possible to catch an ectopic pregnancy early on. When we do, we will give you a medication called **methotrexate**. This medication will help to end your ectopic pregnancy safely.

Methotrexate: how it works

Methotrexate is a medication that targets fast-growing cells (such as egg cells). It stops these cells from growing. The cells then die and dissolve.

How it is given

A nurse will give you methotrexate as an injection (or needle) into your buttock muscle.

You will need to have blood tests done once a week after receiving methotrexate. These tests will measure pregnancy hormone levels in your blood. These hormone levels will tell your doctor how well the methotrexate has worked. Depending on these blood test results, some women may need a second dose of the medication.

If your blood type is **Rh negative**, you will also need to take a medication called **Rho(D)**.

Did you know?

Rh is a type of protein that sits on your red blood cells. A blood test is done to see if you are Rh-positive or Rh-negative. Most people are Rh-positive. If you are Rh-negative your body may respond by producing proteins that destroy the baby's blood cells. To prevent this for any future pregnancy, your doctor will suggest that you take Rho(D). Let us know if you have any questions.

Side effects

You may notice any of the following changes after you have received methotrexate:



 Mild or "crampy" abdominal or belly pain



Nausea (feeling sick to your stomach)



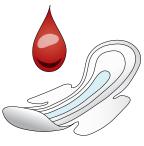
 Light vaginal bleeding (this can last for a few days, up to a few weeks)

When to go to Emergency

If you notice any of the following changes after you have received methotrexate:



 Strong abdominal or belly pain



· Heavy bleeding



Dizziness



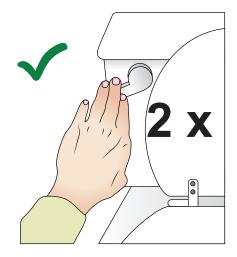
Do not wait. These changes are not normal. Go to the Emergency room right away.

Methotrexate Do's and Don'ts

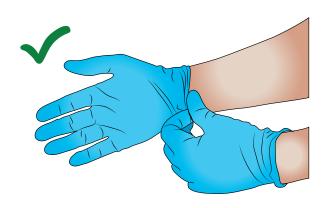
Do's 🔨

Your body gets rid of methotrexate through your body fluids and waste (that is, blood, urine, stool, and vomit).

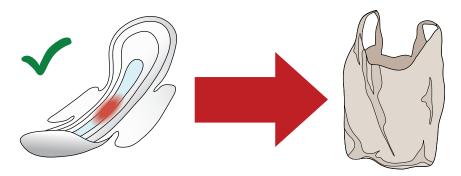
To help protect others from being exposed to this medication, for the first 96 hours after you have received methotrexate make sure that:



• You flush the toilet twice to get rid of any body fluids and waste.



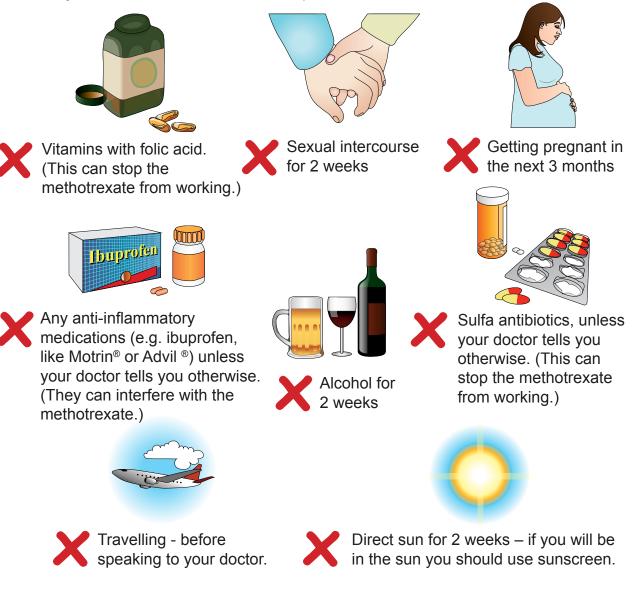
• Your family wears gloves to clean any spills of your blood, urine, stool, and vomit.



• You throw out any used sanitary pads in a separate plastic bag.



Once you have received methotrexate, please avoid:



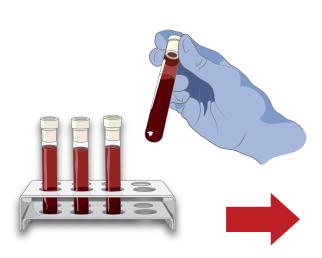
Aside from these, you may continue to go about your regular day-to-day activities, when you are ready.

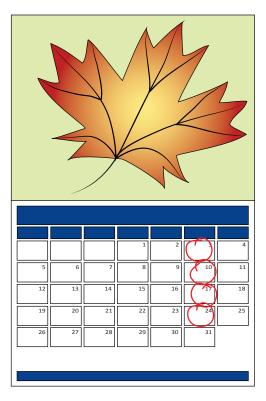
Follow-up care after ectopic pregnancy

To see if the methotrexate has worked, you will need to return to the clinic to have a blood test 1 week after receiving it.

You will need to repeat this test once a week until we can see that there is no more pregnancy hormone left in your body.

When this happens, we know that the medication has worked. This can take at least 4-6 weeks.





Your feelings

Your body may get better before you feel your usual self again. For many women, it takes time before they can feel emotionally better and come to terms with what has happened.

Your feelings of grief and loss may be strong. They may also be different from those of your partner. You and your partner may even express your feelings differently.



If either of you is having trouble working through these feelings, contact your nurse or CLSC. We are here to help!

Looking for more information?

For more information on ectopic pregnancy, visit these websites:

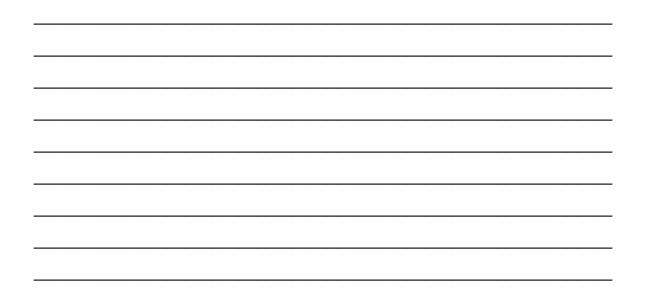
- www.ectopicpregnancy.org
- www.ectopic.org

The following groups offer support for persons who have had ectopic pregnancies:

- The Centre for Reproductive Loss Tel.: 514-486-6708
- Infertility Awareness Association of Canada (IAAC) Tel.: 514-633-4494
- Your local CLSC



Notes



Help support the MUHC Patient Education Office! Donations make a huge difference. Call the Montreal General Hospital Foundation to donate: 514-934-8230.



