

Methotrexate in the medical management of ectopic pregnancy

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What does the drug do?

Methotrexate is a drug that affects a vitamin called folate in the body. Folate is needed to help cells divide rapidly during pregnancy. Methotrexate interferes with the processing of folate and stops cells dividing. This prevents the pregnancy from developing further.

When is treatment most appropriate with Methotrexate?

Methotrexate will only be used in the management of ectopic pregnancy in certain circumstances. These include:

- You are in good health with mild symptoms
- Your tube has not ruptured
- Your pregnancy hormone level (hCG) is low
- There is no severe abdominal bleeding

Treatment with methotrexate is not appropriate if you suffer from certain medical conditions. Your doctor will discuss this with you.

How is the treatment given?

The correct dosage of methotrexate is calculated according to your height and weight.

The treatment is given by an injection administered into the muscle, usually in the buttock or leg.

Most women only require one dose but up to a quarter of cases require a further injection if the hCG levels fail to decrease after the initial treatment.

Following treatment

You will be required to attend hospital or your G.P surgery regularly for blood tests until the pregnancy hormone levels are negative. This can take several weeks.

Your hCG levels will be monitored to ensure that they are falling appropriately. Blood tests are usually performed on day 4 and day 7 after the methotrexate is given.

You may experience some vaginal bleeding 3-4 days after the injection is given. This bleeding can last between a few days and 6 weeks.

You may also experience some discomfort and pain 3-4 days after treatment. If the pain is severe, and isn't helped by taking paracetamol and/or you feel faint, you should contact the early pregnancy assessment clinic or attend the accident and emergency department as this may be a sign that the tube has ruptured.

Any medications, vitamins and/or minerals should be stopped unless you have been told to continue them.

Heavy lifting and exercise should be avoided until the hCG levels are consistently falling.

Sexual intercourse should be avoided until the hCG levels are less than 100 u/l.

Avoid NSAID painkillers such as ibuprofen in the first week after treatment. The preferred pain killer is paracetamol.

You will need to take some time off from work during treatment and most people do not return for around two weeks.

Possible side effects

Mild abdominal pain (often on days 3-4 after treatment)

Extreme tiredness

Other occasional side effects include:

- Nausea
- Indigestion
- Diarrhoea
- A sore mouth

Very rarely, temporary changes in the blood count, liver and kidney functions may occur.

What are the risks?

The main risk of being treated with Methotrexate is that the treatment doesn't work and the ectopic pregnancy continues to develop. This would be indicated by a rise rather than a fall in hCG levels and may result in the need for surgical management.

There is also a risk that the ectopic pregnancy could rupture even with very low hCG levels. If you are concerned about your level of pain or a change in your symptoms then contact the early pregnancy assessment clinic or report to the accident and emergency department.

Emotions

Having an ectopic pregnancy is a very personal experience and each woman copes in their own way. Being treated with methotrexate can be a worrying time and until your hCG levels drop significantly, you may still feel pregnancy symptoms. It is important to remember that the pregnancy could not have continued without causing a serious risk to your health. Before trying for another baby it is important that you wait until you feel ready emotionally and physically. If you have any questions, make sure you speak with your nurse, midwife, GP or gynaecologist.

Future precautions

It is important to avoid becoming pregnant for at least two cycles after treatment which is normally after about three months. This is because the methotrexate may have reduced your folate levels and could result in a baby developing with a neural tube defect such as spina bifida.

Do not begin to take folic acid supplements until your hCG levels are less than 5u/l.

Methotrexate can also affect your liver function so you need to give your body enough time to recover before a future pregnancy is considered.

References

The ectopic pregnancy trust
www.ectopic.org.uk

PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern call 01271 314090 or email rduh.pals-northern@nhs.net. You can also visit the PALS and Information Centre in person at North Devon District Hospital, Barnstaple.

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Royal Devon University Healthcare NHS Foundation Trust
Raleigh Park, Barnstaple
Devon EX31 4JB
Tel. 01271 322577
www.royaldevon.nhs.uk

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