



YouMatter

24 Hour Hotline
614.444.4411
youmatterpdhc.org

Ectopic Pregnancy Patient Instruction Sheet

What is an ectopic pregnancy?

An ectopic pregnancy occurs when the embryo does not implant in the uterus. In many cases of ectopic pregnancy, the embryo implants in one of the fallopian tubes. In rare cases, the embryo attaches to an ovary or other abdominal organs.

Ectopic pregnancy is a potentially life-threatening condition and requires prompt treatment. It usually is discovered by the eighth week of pregnancy.

What causes an ectopic pregnancy?

In most cases, an ectopic pregnancy is caused by conditions that slow down or block the movement of the egg down the fallopian tube and into the uterus. Certain risk factors exist for ectopic pregnancy. A risk factor is a trait or behavior that increases a person's chance of developing a disease or predisposes a person to a certain condition. Risk factors for ectopic pregnancy include:

- Being over age 35
- Smoking
- Use of an intrauterine device (IUD), a form of birth control, at the time of conception
- History of pelvic inflammatory disease (PID)
- Sexually-transmitted diseases such as chlamydia and gonorrhea
- Congenital abnormality of the fallopian tube
- History of pelvic surgery — Scarring might block the fertilized egg from leaving the fallopian tube.
- History of ectopic pregnancy
- Tubal ligation (surgical sterilization), unsuccessful tubal ligation, or reversal of tubal ligation
- Use of fertility drugs
- Infertility treatments such as in vitro fertilization (IVF) or gamete intrafallopian transfer

What are the symptoms of an ectopic pregnancy?

Common symptoms of an ectopic pregnancy include:

- Vaginal bleeding
- Signs of early pregnancy
- Lower abdominal or pelvic pain
- Dizziness or weakness
- Low back pain

If the fallopian tube ruptures, the pain and bleeding could be severe enough to cause fainting, low blood pressure, shoulder pain, and rectal pressure. Sudden lower abdominal pain can be sharp. Contact your health care provider if you are experiencing any of the above symptoms.

How is an ectopic pregnancy diagnosed?

A health care provider will perform a pregnancy test, a pelvic exam, and a vaginal ultrasound test to view the condition of the uterus and fallopian tubes.

How is an ectopic pregnancy treated?

In some cases, medicine might be used to stop the growth of pregnancy tissue. If there is a ruptured fallopian tube, emergency surgery might be necessary to stop the bleeding. A laparotomy (a procedure during which an incision is made in the abdomen and the embryonic tissue is removed) might be needed

if the embryo is large or blood loss is considered life-threatening. Laparoscopic surgery (minimally invasive surgery) might be appropriate if the fallopian tube is not ruptured and the pregnancy has not progressed very far. In some cases, the fallopian tube and ovary might be damaged and have to be removed, depending on the progression of the pregnancy. Most women who have had an ectopic pregnancy can go on to have subsequent normal pregnancies and births. A future successful pregnancy will depend on the why the first ectopic pregnancy occurred, the age of the woman and if the woman already had children. Discuss the timing of your next pregnancy with your health care provider.

Can an ectopic pregnancy be prevented?

Ectopic pregnancy cannot be prevented. However, treatment of any risk factors the mother might have can improve the chances for a successful pregnancy.

References: [Ectopic and Molar Pregnancy](#) Accessed 10/25/2012 [Ectopic Pregnancy](#) Accessed 10/25/2012 © Copyright 1995-2012 The Cleveland Clinic Foundation. All rights reserved.