



METHOTREXATE | TREATMENT FOR ECTOPIC PREGNANCY (EXTRA-UTERINE)

Your doctor has prescribed you a medication called methotrexate. Among other things, it is used to reduce the reproduction of certain cancerous and embryonic (foetal) cells.

We speak of ectopic pregnancy when the embryo does not develop in the uterus, but rather in the Fallopian tube.

For the treatment of ectopic pregnancy, the dose of methotrexate is low. An intramuscular injection is usually necessary.

The treatment stops the development of the embryonic cells (the foetus), and causes the ectopic pregnancy to end.

TREATMENT

The dose you will be given is based on your size and weight. This is why it is important to have specific, recent measurements.

The treatment has been shown to be 90 % effective. The method used to assess the effectiveness of the medication is the blood test for the HGC pregnancy hormone.

Usually, a control blood test is required 3 days and 7 days after you receive the dose of methotrexate. Depending on the result, other blood tests might be necessary.

If the hormonal rate does not decrease quickly enough, you might be given another dose of methotrexate. If the hormone level is not low enough after 2 doses, you could undergo a surgical procedure.

Women with Rh negative blood should receive the Winrho® vaccination to avoid the possibility of a child born of a future pregnancy suffering from hemolytic disease. For optimal treatment, you must stop taking prenatal vitamins and folic acid.

SIDE EFFECTS

Undesirable reactions following the administration of the medication are usually slight and limited, and affect 30 % of patients. Among the possible side effects are: mouth ulcers, stomach aches, gas, abdominal cramps and diarrhea.

WHAT TO EXPECT

- It is normal to feel slight abdominal pain for short periods of time for up to 7 days after receiving the medication.
- The pain is usually relieved by taking acetaminophen (Tylenol®). Mild to moderate pelvic pain is to be expected a few days after treatment. This pain should be relieved by recommended analgesics. Consult a doctor if the pain remains severe or not relieved.
- You will have some light vaginal bleeding that could last from a few days to a few weeks.

FUTURE PREGNANCIES

- The methotrexate you have received will have no effect on future pregnancies. It does not affect fertility.
- Women who had one ectopic pregnancy are at greater risk of having one again.
- Causes of an ectopic pregnancy, such as salpingitis (inflammation of the Fallopian tubes) and some sexually transmitted diseases (STDs), such as chlamydia and gonorrhoea, could decrease your fertility.
- Methotrexate administration during pregnancy can cause major malformations in the fetus. It is therefore generally recommended to wait 3 months after treatment before becoming pregnant again.

SEEK MEDICAL ADVICE IF:

- The pain is severe and not relieved by acetaminophen or by prescribed analgesics. This could be a sign that the Fallopian tube has ruptured. This is an emergency.
- You have significant vaginal bleeding, for example, you need to use more than one sanitary napkin per hour; if you have significant bleeding for more than 12 hours; or if you have blood clots larger than the size of a golf ball.
- You have signs of infection: fever, headache, muscular pain, confusion, increase in your heart rate (pulse), pain, swelling or redness in the genital organs, malodorous vaginal discharge.

If you have questions or concerns



Call Info-Santé 8-1-1.



Consult your doctor at the Gynecology outpatient clinic at the CHUS at 819 346 1110, ext. 14774, or go to the nearest hospital emergency department.

Authors

Caroline Gobeil, nurse, B.Sc; Maryse Grégoire, nurse, M.A;

Dr Guy Waddell; Carine Couturier, nurse, B.Sc; Stéphane Larin, pharmacist.

Revision and layout

Service des communications

Direction des ressources humaines, des communications et des affaires juridiques

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Centre hospitalier universitaire de Sherbrooke, 2020

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June 2023 – 1-6-71503