



## Medical treatment for an ectopic pregnancy

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**We are really sorry that you have been diagnosed with an ectopic pregnancy. This leaflet explains the risks and benefits of having medical treatment (an injection of a medication called methotrexate) for ectopic pregnancy (a pregnancy outside of the womb).**

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### What are my options?

Generally, there are three management options for this condition. Conservative, medical and surgical management.

Your doctor would have discussed these management options with you. In this leaflet, we discuss medical management.

### What is medical treatment and how effective is it?

Currently, medical management is offered with medication called methotrexate. Methotrexate is given in the form of an injection in the muscle of your leg or buttock to treat the ectopic pregnancy.

Folate is an essential vitamin needed to help rapidly dividing cells in pregnancy and methotrexate is a drug that works by temporarily interfering with it. The drug stops the pregnancy developing any further and it is gradually reabsorbed by the body leaving the fallopian tube intact.

Methotrexate works for 65-95% of suitable patients.

### What is methotrexate?

Methotrexate is used (has a licence) to treat many illnesses such as psoriasis and rheumatoid arthritis. It works by stopping fast growing cells. This is why it has been **safely and successfully used for many years** to treat ectopic pregnancies.

### Methotrexate is not licensed to treat ectopic pregnancies – what does this mean?

- Medicines are usually sold to treat (carry a licence for) a specific disease/condition.
- Some medicines are found to be safe and effective for more than one condition.
- Medicine manufacturers do not always apply for a licence for all of the conditions that the medicine can be used for.
- Doctors can still use these medicines for different conditions as long as the patient understands that there is no licence for that use. For example, methotrexate is licensed to treat psoriasis. It is known to be safe and effective in the treatment of ectopic pregnancies, but does not carry a licence for this treatment.

## What are the other options for treatment of ectopic pregnancy?

Some women will not fit the strict criteria for medical treatment of ectopic pregnancy or choose not to have medical management and are offered an operation (laparoscopy). Some patients (who fit certain criteria) are given the option of seeing if the ectopic pregnancy will resolve on its own.

If you want more information regarding these options, please ask your doctor or refer to our information leaflets on these options.

## What are the benefits of medical treatment?

- You can go home after the injection.
- Most women will avoid an operation and all of its risks.
- You will avoid a general anaesthetic.

## What are the disadvantages of medical treatment?

- Medical treatment can fail for 15% of women.
- 15% of cases may need second dose of methotrexate if their hormone level is not falling as expected.
- This can mean an emergency operation to treat the ectopic and sometimes to treat internal bleeding from a ruptured ectopic.
- The clinic will have to monitor you closely, which means regular visits to the hospital for up to 7 weeks.
- **It is very important to remember that you should not try to get pregnant for at least 3 months after the treatment and follow-up have ended.**
- The medical treatment can produce side effects.

## What are the possible side effects of methotrexate?

The side effects are usually mild and are not seen in everyone.

- Nausea (feeling sick)
- Vomiting
- Sore mouth.
- Tiredness
- Vaginal bleeding, like a period will be seen in most women.
- Abdominal (tummy) pain in the first week after treatment is common. **This can occasionally be severe and we ask that you call the Early Pregnancy Unit on 0118 322 7181 at any time if this happens.**

## Will I have to come to the clinic for follow up?

- You will need close monitoring after the injection.
- We are looking for the pregnancy hormone level to drop by 15% between day 4 to 7.
- We will see you 1-2 times per week in the Early Pregnancy Unit.
- You will need blood tests in the clinic until the ectopic has been fully treated.
- It can take up to 7 weeks for full treatment, hence compliance is extremely important.

## Important advice during treatment

During treatment you **must avoid**:

- Alcohol
- Folic acid – as it can cause the treatment to fail
- Sexual intercourse – this may rupture the ectopic pregnancy and cause severe internal bleeding.

## What about future pregnancies?

- Most women go on to have successful pregnancies after an ectopic pregnancy.
- The chance of having a normal pregnancy after methotrexate treatment is the same as after surgical treatment.
- The chance of having another ectopic in future pregnancies is about 1-2 in 10 women. This is roughly the same for women treated with methotrexate or surgery.
- It is very important not to get pregnant for at least 3 months after methotrexate treatment and follow-up have ended.

## For more information

Early Pregnancy Unit (on Sonning Ward)

Level 5

Maternity Block

**Tel: 0118 322 7181** (emergency number available at all times).

The clinic is open Mon – Fri between 7.30am and 8.00pm

Out of hours and at weekends, you can also contact Sonning Ward, Tel: **0118 322 8204**

## References

For more information you can visit the following websites;

- NHS website: <http://www.nhs.uk/Conditions/Ectopic-pregnancy/Pages/Treatment.aspx>
- NICE Guideline (NG126) Ectopic pregnancy and Miscarriage: Diagnosis and initial management. (updated 23<sup>rd</sup> August 2023): <https://www.nice.org.uk/guidance/NG126>
- Diagnosis and Management of Ectopic Pregnancy (Green-top Guideline No. 21) Ectopic pregnancy: <https://www.rcog.org.uk/guidance/browse-all-guidance/green-top-guidelines/diagnosis-and-management-of-ectopic-pregnancy-green-top-guideline-no-21/>

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**Please ask if you need this information in another language or format.**

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