Ectopic Pregnancy

What is an ectopic pregnancy?
An ectopic pregnancy is a pregnancy that is located in the wrong place in the body, outside the uterus. An ectopic pregnancy is a serious condition and can even be life-threatening.

Pregnancy begins when an egg joins together with a sperm. These cells grow into a bigger group of cells, called an “embryo.” In a normal pregnancy, the embryo attaches to the lining of the uterus. Then, it can grow into a baby.

In an ectopic pregnancy, an egg joins with a sperm and forms an embryo, but the embryo does not attach to the lining of the uterus. Instead, it attaches to a place in the body that it should not attach to and starts to grow. Even though the embryo gets bigger, it cannot grow into a baby. As the embryo gets bigger, it can cause pain and bleeding and can even be life-threatening.

In most ectopic pregnancies, the embryo attaches to the lining of one of the fallopian tubes (the tubes that connect the ovaries to the uterus). When this happens, it is also called a “tubal pregnancy.” In rare cases, the embryo can also attach to the cervix, ovary, or the inside of the abdomen.

Who is at risk of ectopic pregnancy?
Women who have abnormal fallopian tubes are at higher risk of ectopic pregnancy. Abnormal tubes may be present in women who have had the following conditions:
- Pelvic inflammatory disease (an infection of the uterus, fallopian tubes, and nearby pelvic structures)
- Previous ectopic pregnancy
- History of infertility
- Pelvic or abdominal surgery
- Endometriosis
- Sexually transmitted diseases
- Prior tubal surgery (such as tubal sterilization)

Other factors that increase a woman’s risk of ectopic pregnancy include the following:
- Cigarette smoking
- Increased age
- Using a type of birth control called an “intrauterine device” or “IUD”. Even though the IUD is 99% effective in preventing pregnancy, if a person using an IUD becomes pregnant, they are at high risk of ectopic pregnancy and should have a healthcare provider check for ectopic pregnancy as soon as possible.

What are the symptoms of an ectopic pregnancy?
- Abdominal or pelvic pain
- Bleeding from the vagina (the bleeding can be heavy or light, or it can even be just spots of blood or brown staining)

Sometimes there are no symptoms until the ectopic pregnancy causes more serious problems. For example, an embryo growing in a fallopian tube can cause the fallopian tube to burst open. When this happens, symptoms can include:
- Severe lower abdominal pain
- Shoulder pain
- Heavy bleeding from the vagina
- Fainting or passing out, or feeling like you might faint or pass out

If you are pregnant and have any of the symptoms listed above, go to an emergency room as soon as possible.
Is there a test for an ectopic pregnancy?
To check if you have an ectopic pregnancy, your doctor or nurse can do:
• A blood test to measure a hormone called hCG- This test checks if you are pregnant and how much hCG the pregnancy is making.
• An imaging test called an ultrasound to see where the embryo is in your body- imaging tests create pictures of the inside of the body
Sometimes, test results show an ectopic pregnancy right away. Other times, repeat tests are needed every few days to know for sure if there is an ectopic pregnancy.

How is an ectopic pregnancy treated?
Ectopic pregnancy can be treated in 2 ways, depending on the size of the embryo, the symptoms, and other factors. Both treatments involve removing the embryo. A person can be treated with:
• Medicine- In some cases your healthcare provider can give you a shot of medicine that stops the embryo’s growth and causes the body to reabsorb it over time. It is very important to have follow-up blood tests for a few weeks to make sure that the treatment worked.
• Surgery- A doctor can do surgery to remove the embryo. If it is early and the pregnancy is small, the surgery may be laparoscopic (through a small cut using a scope). Sometimes a larger abdominal incision is needed if the pregnancy is large or blood loss is a concern. Your doctor might or might not need to remove your fallopian tube.

Can an ectopic pregnancy be prevented?
Most ectopic pregnancies cannot be prevented. There is a higher chance of having an ectopic pregnancy if a woman gets frequent sexually transmitted infections. To reduce the chance of getting an infection from sex, use a condom. Periodic screening tests for sexually transmitted infections, if you are at risk, are important.

Can I get pregnant in the future?
Most people are able to have a normal pregnancy after having an ectopic pregnancy. But let your clinician know if you are trying to get pregnant. That way, he or she can follow your pregnancy to make sure everything is normal.

*Precautionary Guidelines*
For person with positive pregnancy test and risk for ectopic pregnancy

1. Stay in town and in touch with your clinician as advised.
2. Obtain laboratory and other diagnostic tests as recommended.
3. Communicate with your clinician for your test results and to establish a plan for your follow-up care.
4. No intercourse or vigorous activity until a definitive diagnosis is made. Vigorous activity would include jogging, dancing, aerobics, etc.
5. If you experience severe lower abdominal pain, heavy vaginal bleeding, dizziness or fainting, have someone take you to the closest hospital emergency room immediately. Tell them you might have an ectopic pregnancy. If necessary, call 911 for an ambulance.
6. If you go to the hospital, please notify your clinician or the Clinic Nurse at 510/643-7097.
7. If you have the University Health Insurance (SHIP), you will need to call the Student Health Insurance Office (510/643-7197) for insurance authorization within 24 hours of emergency care for insurance reimbursement.

Check our website: www.uhs.berkeley.edu to learn more about this medical concern or others.
For an appointment: www.uhs.berkeley.edu or call 510-642-2000 For Advice: call Clinic Nurse 510-643-7197