An ectopic pregnancy is a pregnancy that takes place outside the uterus. Normally an egg is fertilized in a fallopian tube and travels down the tube into the uterus.

In an ectopic pregnancy (also called a tubal pregnancy), the fertilized egg implants itself outside the uterus, most often in the fallopian tube. The egg may rarely implant in the ovary, cervix, or abdomen.

An ectopic pregnancy is often diagnosed in the first two months of pregnancy even before a woman knows that she is pregnant.

Signs of an Ectopic Pregnancy
Some of the signs of an ectopic pregnancy include:

- Missed period
- Spotty or heavy vaginal bleeding
- Pain in the pelvis, lower abdomen, or lower back
- Nausea or vomiting

The fallopian tube can rupture as the fertilized egg (embryo) grows. Signs of a ruptured tube may include:

- Sudden increase in pain
- Stabbing pain in the pelvis or abdomen
- Shoulder pain
- Dizziness or fainting

An egg implanted in the uterine wall

Sites where an egg may implant in an ectopic pregnancy
Diagnosis and Treatment
An ectopic pregnancy can be life threatening and needs to be diagnosed and treated quickly. Lab tests and an ultrasound may be done. A needle can be inserted into the space at the top of the vagina to check if there is blood present from a ruptured tube (culdocentesis).

Treatment involves removing the embryo because the pregnancy cannot safely progress. If an ectopic pregnancy is diagnosed very early, an injection of methotrexate may be given as treatment. A second or third injection may be needed. After methotrexate treatment, it is important to have follow-up lab tests. Methotrexate treatment can be given as a single shot or as several injections. If an ectopic pregnancy continues after 2 or 3 doses of methotrexate, surgical treatment is needed to remove the ectopic pregnancy.

If methotrexate cannot be used or is unsuccessful, surgery either by laparoscopy or an abdominal incision will be needed. A laparoscopy involves the doctor inserting a lighted tube/instrument through a tiny incision in the abdomen. The embryo is removed and any damaged tissue, such as the fallopian tube, is repaired or removed. If a large amount of blood has been lost, a transfusion may be needed. Your doctor will discuss what measures are necessary for your case.

Causes
The cause of ectopic pregnancy is not always known, although it is usually related to blockage of the fallopian tube. Some things that can cause blockage include:

- An earlier infection of a tube or pelvic inflammatory disease (PID) most often caused by Chlamydia and gonorrhea
- Endometriosis
- Surgery on the tubes, ovaries, or a ruptured appendix
- Use of an intrauterine device (IUD)
- Growth pressing against the tube

Recovery and Adjustment
An ectopic pregnancy comes as a surprise. You may need to take extra care of your physical and emotional health at this time. You will be given instructions on how to care for yourself after your treatment or surgery. Take the time that you need to care for yourself.

To prepare for your follow-up doctor’s visit, try to keep a list of questions. You may want to ask:

- “Why did this happen at this time?”
- “When can I try to become pregnant again?”
- “What can I do to prevent another tubal pregnancy?”

The end of any pregnancy can bring many emotions. With an ectopic pregnancy, you may be finding out that you are pregnant at the same time that the pregnancy is ending. You may feel shock, anxiety, or fear. You may not understand what is happening to your body.

After the testing and medical treatment or surgery you may realize that “This was a baby.” Sometimes this awareness comes days or weeks later. When the feelings come, they can be confusing. There may be no logical reason why this happened. You may feel concerned or sad if there was damage to a tube, or you may be anxious about the chance for future pregnancies. Some women feel frustrated, angry, or guilty for events in the past. Other women may feel numb with no particular feelings at all.
It is difficult to cope with any loss when there has been no time to prepare. At first, you may find yourself thinking about the experience. You may tell many people about it. You may feel sensitive, tearful, or lonely. You may be anxious about your health and concerned about your relationships.

Each person reacts to loss and heals in his or her own way. Finding ways to cope and care for yourself allows you to go forward.

This is the time to be asking yourself what would help you now. Some steps you might take include:

- Getting support from your partner or a good friend.
- Consulting with your doctor.
- Talking with your clergy-person or a counselor.
- Reading about ectopic pregnancy or pregnancy loss.
- Attending a support group for parents who have lost a baby during pregnancy.
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<td><strong>Culdocentesis</strong></td>
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