A molar pregnancy, also called a hydatidiform mole, happens rarely. In a molar pregnancy, tissue that should form the placenta instead forms into a grape-like mass of abnormal cells called a mole. This occurs early in a pregnancy but is often not detected until the third or fourth month. It can also occur because placental tissue remained in the uterus after a miscarriage or childbirth.

**Signs of a Molar Pregnancy**
Women with a molar pregnancy will have a positive pregnancy test and think that they have a normal pregnancy. The uterus will grow fast and vaginal bleeding may occur by the end of the third month or earlier. This bleeding can be light or very heavy. Other symptoms may include severe nausea, vomiting, and high blood pressure. Because there is no fetus growing, there will be no fetal movement and no fetal heartbeat.

Your doctor may not suspect a molar pregnancy until after the third month when the uterus is growing quickly and no heartbeat is present. A blood test will be done to check the hCG (human chorionic gonadotropin) hormone level. This level is very high with a molar pregnancy. An ultrasound may be done to check that there is no living fetus.

**Treatment**
The molar pregnancy tissue must be removed from the uterus because it can become cancerous. The woman may pass the tissue after the fourth month, or the doctor may give her a drug to trigger the release of the tissue. Surgery such as a D&C, in which the lining of the uterus is suctioned to remove any remaining molar tissue, may also be done.

Because of the cancer risk after a molar pregnancy, the woman’s blood will be checked for the hCG level:
- Weekly until the level is normal
- Then every month for another 12 months

**A woman should be certain not to get pregnant until the hCG level has been normal for at least a year.** Pregnancy will increase hCG levels making it impossible to detect cancer that may occur because of the molar pregnancy.

If the hCG level does not return to normal in the first few months, or rises again later, the molar tissue may have become cancer. In the rare case that this occurs, treatment may include surgery, chemotherapy, and/or radiation. The type of treatment depends on how the cancer has spread. Treatment is usually successful.

A woman with a molar pregnancy may feel loss and have swings in her emotions, as does a woman who has had a miscarriage. There is the added concern that cancer could occur. Talk with your doctor and nurse about any questions and concerns you may have. Tell your doctor or nurse if you are having problems coping. You may also want to talk with your clergy person or a counselor.

In most cases a woman can become pregnant again and have a normal pregnancy. Talk with your doctor when you are thinking about becoming pregnant again.