

months after the injection. It is important therefore that you use contraception during this time.

### What should I do if I feel unwell afterwards?

If you have

- severe pain in your tummy
- shoulder tip pain
- heavy vaginal bleeding
- feel faint or
- collapse

you must attend the CUMH Emergency room immediately. If necessary, call an ambulance.

If you have mild pain or feel worried, please telephone us to ask for advice.

### How can I avoid getting another ectopic pregnancy ?

It is usually unclear what the cause of ectopic pregnancy is.

However we do know that after an ectopic pregnancy, the progesterone-only pill (e.g. Noriday) may slow down the function of the tubes, so this type of contraception is best avoided.

Untreated pelvic infection (such as a Sexually Transmitted Infection) may increase your risk of another ectopic. Condoms reduce this risk. If, in the future you think you may have an infection or have symptoms of a foul smelling discharge or erratic or heavy periods, you should attend your GP or the STI clinic in the South Infirmary/ Victoria Hospital for testing.

### How long do I need to use contraception for afterwards?

It is important that this medicine is fully removed from your body before you try to have another baby. If not, this medicine may affect the development of your future baby. It is eliminated 3

### When can I try again for a baby?

After 3 months methotrexate will be out of your system. However you will need to build up your stores of Folic acid again because methotrexate reduces the amount of Folic acid in your body. It is recommended that you take Folic acid tablets for a further 3 months before trying again.

### What should I do when I find out I am pregnant again?

Once your pregnancy test is positive, you should attend your GP to confirm the pregnancy. Your GP should request an early ultrasound scan at 7-8 weeks after the first day of your last period. This scan can try to confirm where the next pregnancy is located. There is approximately a 10-15% chance of another ectopic pregnancy.

“Pregnancies of unknown location” rarely recur.

### Important phone numbers:

CUMH Reception	021 - 4920500
Emergency Department	021 - 4920545
CUMH Ward 4 South Gynae	021 - 4920688

If you have any questions please contact us on Ward 4 South.



## Guide to Methotrexate



**Information Leaflet**  
**Cork University Maternity Hospital**

### Date and Time and Location of appointments:

Day 0 \_\_\_\_\_

Day 4 \_\_\_\_\_

Day 7 \_\_\_\_\_

Weekly Visits \_\_\_\_\_

Discharge Visit \_\_\_\_\_

### Introduction

Methotrexate is a medicine which is used for pregnant women whose pregnancy has, unfortunately, not developed **in the womb**, e.g.

- 1) Ectopic/ Tubal pregnancies
- 2) Pregnancies of “Unknown Location”

The doctor must be absolutely sure that the diagnosis is correct. There must be no chance of a normal pregnancy or a tiny baby in the womb being missed.

The diagnosis is made by an Ultrasound scan and by blood tests for the Bhcg hormone level. The hormone level does not rise properly as would be expected for a normal pregnancy.

### What is Methotrexate?

Methotrexate is a medicine which is targeted at fast-growing cells – like the placenta. It stops the placenta growing. This allows the pregnancy to come to an end.

### What are the potential side-effects of Methotrexate?

Some women experience side effects. Feeling tired is very common, as well as mild tummy pain.

Other side effects include:

- Diarrhoea, nausea and vomiting
- Cracked lips
- Conjunctivitis (red eyelids).

### How is the Methotrexate given?

The amount of medicine you need is calculated depending on your height and weight. It is a small injection (usually one syringe), which is given in the deep muscle of the buttock or upper arm.

### Is there anything I should avoid after the Methotrexate injection?

- It is important that you are extra careful with your toilet hygiene. Children and other pregnant women should not be exposed to this medicine, which may still be found in your bowel motion.
- You should not take pain killers like Nurofen, Difene, Ponstan, Mefac, Aspirin, (NSAID type) for 2 weeks.
- You may safely use Paracetamol based painkillers.
- You should *stop* taking Folic acid for 3 months.
- You should avoid alcohol for two weeks.

### Does the injection hurt?

There is a small amount of discomfort during and after the injection.

### Will I need more than one dose?

Some patients (15%) will require two or more injections to complete the process. This is assessed from your blood test on day 7

### What if this treatment does not work?

Methotrexate treatment may not work in about 10% of women. If this happens, the placenta

continues to grow and you may bleed internally. This can cause severe tummy pain or bleeding. You will then need to come into hospital urgently. You may need an operation to remove the tube and stop any bleeding.

This is an operation on your tummy. It can be done either by key-hole surgery or via a cut in the tummy. The rare potential risks of this operation are infection, blood transfusion, scar tissue and anaesthetic problems.

### What are the alternatives to Methotrexate?

#### 1) For those with an ectopic pregnancy:

Some patients may be suitable for the alternative of an operation. The operation will remove the ectopic pregnancy (as well as the tube usually). This can be done by key-hole surgery or by a cut in the tummy, under General Anaesthetic. There are rare risks of surgery such as infection, bleeding, scar formation and anaesthetic complications. In the future, this means that if a tube is removed, your fertility will decrease by about 40%. However the chance of another ectopic pregnancy in the future is also reduced, as that tube is no longer there.

#### 2) For those with a pregnancy of Unknown location:

Some patients with a very low level of hormone may be suitable for a “Watch and Wait” approach. This means that your symptoms and blood tests are closely monitored, until the pregnancy has come to a close. The potential risks of this alternative are of bleeding, blood transfusion and sudden collapse.

### What happens after the Methotrexate injection?

About an hour after the injection you will be usually be discharged home (Day 0). You will be asked to

attend for blood tests and to check that you are still well on **Day 4 and Day 7** after your injection. On day 4 there may little change or even a small rise in your Bhcg hormone level. By day 7 your Bhcg hormone levels should have dropped by at least 15%. Some patients may then attend weekly, until the Bhcg hormone level is less than 5. This may take several weeks.