Consumer information

Queensland Clinical Guidelines

Methotrexate for ectopic pregnancy

This information sheet aims to answer some commonly asked questions about taking the medication methotrexate for managing an ectopic pregnancy.

IMPORTANT: This is general information only. Ask your doctor, midwife or nurse about your own situation.

What is a methotrexate?

Methotrexate is a medicine used to stop the growth of an ectopic pregnancy. It is given as an injection into the muscle (bottom or thigh) or by a drip in a vein in your arm. Sometimes it may need to be given directly into the pregnancy sac. Usually only one injection is needed although occasionally a woman may need more than one.



Image: Intramuscular injection sites

Are there any side-effects?

The most common side-effects are:

- nausea and vomiting
- abdominal cramping
- indigestion
- dizziness
- rashes

These usually settle within a few days without any treatment. Serious side effects can occur but are not common.

AVOID DURING TREATMENT



direct sunlight avoid long periods outside, wear protective clothing and use sunscreen to limit skin inflammation

sexual intercourse avoid vaginal or anal intercourse because it can increase the chance of ectopic rupture (bursting)

folic acid

food and supplements with folic acid (e.g. broccoli and multivitamins) can decrease effectiveness of methotrexate

antiinflammatory medicines

(e.g. aspirin, ibuprofen, voltaren) can increase side effects of methotrexate

Monitoring during treatment

You will need blood tests to check the pregnancy hormone (beta hCG) during and after your treatment. This is to make sure the level of hCG returns to normal. It can take several weeks for this to happen. Some women also need an ultrasound after treatment to make sure the ectopic pregnancy has completely resolved.

When should you go to the hospital?

Go straight to the hospital if you have any of the following:

- severe abdominal pain
- shoulder tip pain
- heavy vaginal bleeding
- unusual bruising anywhere on your body
- signs of infection such as high temperature (fever), chills, feeling unwell, or vaginal discharge that smells unpleasant





Special precautions

Methotrexate can remain in body fluids (vomit, urine, faeces) for up to seven days after your treatment has ended. Because it is also used to treat some cancers, it is important to avoid other people coming into contact with methotrexate:

- after using the toilet, close the lid and use a full flush
- use gloves if touching clothes or linen that have your body fluids on them
- wash these items straight away on the longest wash cycle in hot or cold water separate from other items

It is ok to touch and hug other people during this time.

When can you get pregnant?

Avoid pregnancy for at least 3 months after your treatment. Always use contraception during this time. This is because methotrexate can cause damage to a developing baby. Talk with your healthcare provider about when it is safe to plan for another pregnancy.

Need more information?

Talk with your pharmacist or healthcare provider about any concerns or questions you may have. You might like to read our information sheet on *Ectopic pregnancy*.

Support & Information

Queensland Clinical Guidelines Information for parents and families www.health.qld.gov.au/qcg **13HEALTH** (13 432584) health information, referral and services to the public by phone.

Pregnancy, Birth & Baby Helpline 1800 882 436 (free call) information and counselling on conception, pregnancy, birthing and postnatal care. www.health.gov.au/pregnancyhelpline

SANDS (1300 308 307) support and information on miscarriage, stillbirth and neonatal and infant death www.sands.org.au

Lifeline 13 11 14 a telephone crisis support service. www.lifeline.org.au

The Pink Elephants Support Network support through miscarriage and pregnancy loss www.miscarriagesupport.org.au
Pregnancy Counselling Link (PCL) a community agency staffed by tertiary qualified, professional counsellors, who support women in the areas of pregnancy, parenting, relationships, navigating life changes, fertility issues, and loss and grief. Support is also available for partners and other family members. www.pcl.org.au

