

Obstetrics and Gynaecology: Early Pregnancy & Emergency Gynaecology Unit

Surgical treatment of ectopic pregnancy

This leaflet will explain the various operative procedures that are possible to treat an ectopic pregnancy. We will discuss your preferences with you before your operation including your desire for future pregnancies or sterilisation if you have completed your family.

Laparoscopy (keyhole surgery)

The operation is performed under general anaesthetic and involves the surgeon making three or four small incisions in your abdomen. One at the umbilicus (navel) and two or three lower down near the bikini line. A small amount of gas is introduced into your abdominal cavity to inflate it, to allow the surgeon to see the structures inside your abdomen and the ectopic pregnancy through the laparoscope. (A laparoscope is a small telescope like instrument).

Once an ectopic pregnancy is confirmed the surgical procedure undertaken depends on the condition of your fallopian tubes.

The affected tube will usually be removed fully or partially. This is called **salpingectomy** (partial or complete). However your other tube will remain along with your ovaries.

In certain cases it may be possible to make a cut on the tube and remove the pregnancy leaving the tube intact this is called a **salpingotomy**.

There is only a small risk of injury to the bowel, bladder and blood vessels with the laparoscope (1 in 1000).

Laparotomy

A cut about 8-10cm long is made usually along the bikini line to enter inside the abdomen. This procedure is chosen if the laparoscopic procedure is unsuccessful or impossible or if it is felt unsafe to perform a laparoscopy.

After one ectopic pregnancy the rate for a future normal intrauterine pregnancy is about 60 to 70%.



Patient Information

Your Hospital stay

This will vary depending on the operation you need. It is normally one to two days after laparoscopy and three to five days after laparotomy.

After discharge

The ward staff will give you all the necessary advice on aftercare, exercise and diet. You may experience period like bleeding for a week or two, avoid using tampons during this time. You should also avoid sexual intercourse until the bleeding has stopped.

Follow up

If the tube is saved at surgery there is some risk that some of the pregnancy remains in the tube. You will be advised to have weekly blood tests to monitor hCG (pregnancy hormone) levels as they decrease.

You may be sent an out-patient appointment for six weeks time.

Returning to work

It may be anytime from two to six weeks depending on the type of operation you have had and the type of work you do. Your doctor will advise you.

In your next pregnancy

The chances of having another ectopic pregnancy are about 10–20%.

After Salpingotomy (saving the affected tube) ectopic pregnancy is equally likely to reoccur in the operated tube as in the other tube.

Once your next pregnancy is confirmed it is important that you have a scan at approximately 6 weeks in the Early Pregnancy Assessment Unit to confirm the location of your pregnancy. This can be organised by your GP or by contacting the unit directly on the number given at the end of this information.

Your feelings

It is entirely normal to feel helpless, isolated and angry with yourself. Depression, guilt and self-blame are very common emotions after the loss of a baby. As time passes, you will be able to deal with your loss more positively. You may find that you are ready to get on with your life quite quickly. If your symptoms continue, you should get in touch with your GP who will offer you the opportunity to see a counsellor who will be able to help you. Your well-being is the most important thing.

Your partner may find it difficult to express his feelings. He may well feel that he should be strong and protect you from any more distress. If this is the case, you will need to encourage him to talk to you about his feelings. Sharing each others feelings can be very helpful.

Allow yourself time to recover physically and emotionally before trying for another baby.

If you need any further information or advice please do not hesitate to ask the staff.

Patient Information

Contact information

Early Pregnancy & Emergency Gynaecology Unit: **024 7696 7000**

The Ectopic Pregnancy Trust

Helpline: **020 77332653**

www.ectopic.org

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 7000 and we will do our best to meet your needs.

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