

You should not do any heavy lifting or vigorous housework for around 2 weeks and should only undertake gentle exercise such as walking and possibly gentle swimming, once the wound sites on the skin have healed. The staff at the hospital should also advise you about pelvic floor (Kegel) exercises, as these can greatly help you to recover your normal tummy and bladder tone in the weeks to come.

In the first few days, it is important to take the painkillers or iron tablets that may have been prescribed for you, as they will help you to manage your pain and feel more comfortable after an operation.

### ***Your emotions***

Undergoing treatment for an ectopic pregnancy is a stressful and scary experience. As well as the physical strain of treatment, you may also find it challenging to come to terms emotionally with what has happened. It can be difficult to process and for emotions to surface properly. Women often feel a complex mix of emotions and this is understandable and normal. Do give yourself time and space to recover physically, psychologically and emotionally. It is important to remember that the ectopic pregnancy was not your fault and that there was nothing you could have done to prevent it happening.

### ***Your partner's emotions***

Partners can sometimes find it difficult to understand your feelings and you may feel your partner is not supporting you in the way in which you would like. Partners can feel confused, scared and isolated too but typically express their emotions in a different way and often do not share how they feel. Your partner's focus may be on you and your wellbeing rather than the pregnancy and this can be difficult to accept. It is important to keep communication open and to speak to your partner about your feelings and theirs.

### ***How The Ectopic Pregnancy Trust can provide support***

The Ectopic Pregnancy Trust provides information and support to women and their families experiencing early pregnancy complications and loss, such as ectopic pregnancy or miscarriage. Our website has medically-overseen content and includes moderated message boards where you can share your experiences with others who understand what you are going through and ask questions. The message boards provide an arena for mutual support in a safe, supportive environment: go to [ectopic.org.uk/talk](http://ectopic.org.uk/talk). If you think we can help you, please visit our website, email or call.

# Surgical Management

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Publication date: July 2017



Website: [ectopic.org.uk](http://ectopic.org.uk)  
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We are sorry that your doctor has informed you that you have an ectopic pregnancy. It is an emotionally and physically difficult time and you will probably have some questions about your treatment and what is happening to you. There are different ways an ectopic pregnancy can be treated so, in this handout, we will cover only questions that relate to surgical management of ectopic pregnancy. Further information and support can be found at [www.ectopic.org.uk](http://www.ectopic.org.uk).

### ***What is surgical management?***

This means performing an operation to remove the ectopic pregnancy and will involve a general anaesthetic. Surgery is the longest established form of treatment.

### ***When is surgery most appropriate?***

Doctors will suggest that operating to remove the ectopic pregnancy is the best treatment for you if:

- Your hormone being made by the pregnancy (beta hCG) is high;
- Your scan shows that the ectopic pregnancy is large; or
- Significant internal bleeding has been seen on your scan

If you have any of these symptoms, the doctors cannot consider less invasive treatments for you because your health may be at risk. Surgery may also be performed if expectant management or medical management has failed.

### ***What will surgery involve?***

In most cases, you will be operated on using a technique called laparoscopy (keyhole surgery). This involves inserting a camera through a small cut in the navel (belly button) and inserting instruments through two further small cuts in the lower abdomen. A small amount of gas is put into your abdominal cavity to inflate it to enable the surgeon to see inside the abdomen.

Traditionally, surgery involves laparotomy (open cut) on the lower abdomen just below the bikini line. This is still occasionally used if there is heavy internal bleeding/rupture or a lot of scar tissue. This will be performed in an emergency situation. If there is extensive bleeding, a blood transfusion may need to be given.

Both techniques will enable the surgeon to examine the abdominal cavity.

### ***How will the ectopic pregnancy be treated?***

There are two courses of action for the surgeon and the one chosen will depend upon the location of the ectopic pregnancy and the damage to the affected area.

Most ectopic pregnancies occur in the Fallopian tube. If there is a lot of damage or bleeding, the affected tube will be removed (salpingectomy). Also, if the other fallopian tube looks normal, the most likely operation is that the Fallopian tube with the ectopic pregnancy is removed.

If the other Fallopian tube does not look normal, efforts will be made to save the affected tube by removing the ectopic pregnancy through a small cut, leaving the tube in place (salpingotomy). Unfortunately, it is not always possible to carry out a salpingotomy when there are concerns about the other tube (such as if it has ruptured). With a salpingotomy, there is a small risk that some of the pregnancy tissue remains in the tube. You will be advised to have weekly blood tests to monitor hCG levels as they decrease and the pregnancy is fully resolved.

In a very small number of cases, treatment with a drug called Methotrexate may be required or a further operation needed if hCG levels are not decreasing.

### ***How long will I stay in hospital?***

This depends upon the operation you had. For a laparoscopy, it is usually 1-2 days and for a laparotomy, it is usually 2-3 days. When you are discharged, the ward staff will give you all the necessary advice on aftercare, exercise and diet. Stitches are usually dissolvable and should dissolve completely after 1 week. Sometimes, they dissolve more slowly and if they are irritating you they can be removed after 1 week.

### ***How will my doctors keep me monitored?***

If you had a salpingotomy or if there was any doubt that all or any of the pregnancy tissue was removed, your doctors will usually test your hCG levels to ensure that they are dropping. In this instance, it may be necessary to check your hCG levels again after a week and possibly beyond. If you had a salpingectomy, no follow up is usually needed although some hospitals ask you to return for an out-patient appointment about 6 weeks after surgery to check that your abdomen has healed properly and to answer any questions. If you are not offered a follow-up appointment, your GP would probably like to see you at around 6 weeks or before you return to work to undertake a post-operative check.

### ***How will I feel after the surgery?***

Most women experience pain during the first 1-2 weeks after surgery which can be treated with painkillers. If you have had a laparoscopy, you are likely to feel bloated for the first week, with pain similar to trapped wind. This is due to the gas which is used during the surgery. You will feel tired, particularly if you lost a lot of blood during the procedure. If you had to have a blood transfusion, you may be offered iron tablets.

### ***What can I do to help me recover from the surgery?***

In the first days after surgery, it is important to try to keep moving gently. Make sure you walk around regularly and increase the short distances you walk as each day passes.

Your nurses will tell you anything you need to know about managing your wound sites, for example, if the stitches are dissolvable or if you need to return to have them removed and when. You need to keep your wound site clean.

You can shower regularly and you can safely take a bath 48 hours after the operation unless you have been told otherwise. It is a good idea to make sure you have someone with you in the house when you first take a bath in case you need help to get out again.