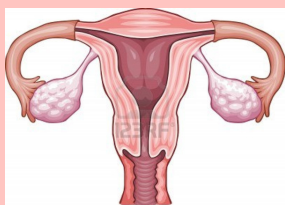


ECTOPIC PREGNANCY

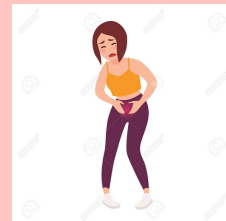


What is it?

Pregnancy implanted outside uterus
Usually in fallopian tube

Risk Factors

Previous ectopic
Pelvic Inflammatory disease
Tubal surgery
Older age
Smoking
intra-uterine device



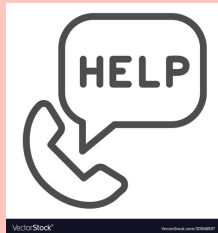
How does it present?

Symptoms

Abdominal / pelvic pain
Amenorrhoea / missed period
Vaginal bleeding

Signs

Abdominal / Pelvic tenderness
Peritonism
Tachycardia
Shock / Collapse



Initial investigations / management

Urinary HCG (positive)

If haemodynamically unstable / severe bleeding / unilateral pain

Resuscitate
Senior input
Bloods including serum HCG and cross match
Refer to gynae



Management of stable patients

(Urinary HCG positive)

No haemodynamic instability
No pain or only mild crampy midline pain

May be discharged with EPAU follow up

Safety net advice - worsening unilateral pain, syncope, increasing bleeding must return to A&E

Notes

- Incidence of ectopic pregnancy is 11/1000 pregnancies
- Typically presents 6-8 weeks gestation
- Pregnant women may have pathology unrelated to pregnancy - don't forget other causes

Sources

<https://www.cem.scot.nhs.uk/adult/pvbleed.pdf>
<https://www.nice.org.uk/guidance/ng126/chapter/Context>