

# Ectopic pregnancy: Early detection, risks, and treatment options.

Marcos Contag\*

Fertility Clinic 4071, Copenhagen University Hospital, Denmark

## Introduction

Ectopic pregnancy occurs when a fertilized egg implants outside the uterus, most commonly in a fallopian tube, but it can also occur in the ovaries, abdominal cavity, or cervical canal [1]. This condition affects about 1 in 50 pregnancies and poses significant health risks to the mother if not diagnosed and treated promptly. Understanding the symptoms, risks, and treatment options for ectopic pregnancy is essential for ensuring the health and safety of women experiencing this complication [2].

Early detection of ectopic pregnancy is critical, as symptoms can often be mistaken for normal pregnancy discomfort. Common early signs include abdominal pain, especially on one side, and vaginal bleeding [3]. Women may also experience dizziness or fainting due to internal bleeding if the ectopic pregnancy ruptures. Since these symptoms can occur in various pregnancy-related conditions, it is essential for individuals to seek medical attention if they experience any unusual pain or bleeding [4].

Healthcare providers utilize several diagnostic methods to confirm an ectopic pregnancy. Transvaginal ultrasound is commonly employed to visualize the location of the pregnancy [5]. Additionally, measuring human chorionic gonadotropin (hCG) levels in the blood can provide further insights. In a typical intrauterine pregnancy, hCG levels should rise significantly over time; however, in an ectopic pregnancy, these levels may rise more slowly or plateau [6].

The risks associated with ectopic pregnancy can be severe, particularly if the ectopic tissue ruptures, leading to internal bleeding, which can be life-threatening [7]. Factors that increase the risk of ectopic pregnancy include a history of pelvic inflammatory disease (PID), previous ectopic pregnancies, certain fertility treatments, and smoking. Understanding these risk factors can help women make informed choices regarding their reproductive health [8].

Treatment options for ectopic pregnancy depend on the location and size of the ectopic tissue, as well as the woman's overall health and desire for future pregnancies. In some cases, if the ectopic pregnancy is detected early and is not causing severe symptoms, medication such as methotrexate may be prescribed. This drug works by stopping the growth of the ectopic tissue, allowing the body to absorb it naturally [9].

Surgical intervention may be necessary if the ectopic pregnancy is larger, causing significant pain, or if there is a risk of rupture. Laparoscopic surgery is the most common

approach, allowing for the removal of the ectopic tissue with minimal invasiveness. In some cases, the affected fallopian tube may need to be removed, particularly if it has been severely damaged [10].

## Conclusion

Ectopic pregnancy is a serious condition that requires prompt recognition and treatment to ensure the safety and health of the mother. Awareness of the signs and risk factors associated with ectopic pregnancy, combined with timely medical intervention, can lead to better outcomes. Women experiencing symptoms suggestive of ectopic pregnancy should seek medical attention immediately, as early detection and appropriate treatment are crucial in preventing complications and preserving future reproductive health.

## References

1. Jurkovic D, Wilkinson H. Diagnosis and management of ectopic pregnancy. *Bmj*. 2011;342.
2. Rana P, Kazmi I, Singh R, et al. Ectopic pregnancy: a review. *Arch Gynecol Obstet*. 2013;288:747-57.
3. Marion LL, Meeks GR. Ectopic pregnancy: history, incidence, epidemiology, and risk factors. *Clin Obstet Gynecol*. 2012;55(2):376-86.
4. Alkatout I, Honemeyer U, Strauss A, et al. Clinical diagnosis and treatment of ectopic pregnancy. *Obstet Gynecol Surv*. 2013;68(8):571-81.
5. Gracia CR, Barnhart KT. Diagnosing ectopic pregnancy: decision analysis comparing six strategies. *Obstet Gynecol*. 2001;97(3):464-70.
6. Lin EP, Bhatt S, Dogra VS. Diagnostic clues to ectopic pregnancy. *Radiographics*. 2008;28(6):1661-71.
7. Constance ES, Moravek MB. Diagnosis and management of ectopic pregnancy. *GYN*. 2023: 373-386.
8. Casikar I, Reid S, Condous G. Ectopic pregnancy: Ultrasound diagnosis in modern management *Clin Obstet Gynecol*. 2012;55(2):402-9.
9. Fylstra DL. Tubal pregnancy: a review of current diagnosis and treatment. *Obstet Gynecol Surv*. 1998;53(5):320-8.
10. Dabota BY. Management and outcome of ectopic pregnancy in developing countries. *ectopic pregnancies*. 2011;109.

\*Correspondence to: Marcos Contag, Fertility Clinic 4071, Copenhagen University Hospital, Denmark. E-mail: contag@cu.dk.in

Received: 25-Sep-2024, Manuscript No. AAPNM-24-151685; Editor assigned: 26-Sep-2024, PreQC No. AAPNM-24-151685(PQ); Reviewed: 10-Oct-2024, QC No. AAPNM-24-151685; Revised: 15-Oct-2024, Manuscript No. AAPNM-24-151685(R); Published: 22-Oct-2024, DOI: 10.35841/aapnm-8.5.227

**Citation:** Contag M. Ectopic pregnancy: Early detection, risks, and treatment options. *J Preg Neonatal Med.* 2024;8(5):227