Pregnancy of Unknown Location
Information for patients and their partners

You have been given this leaflet because you had an early pregnancy transvaginal ultrasound scan that was reported as "Pregnancy of unknown location". This leaflet answers some of the questions you may have about pregnancy of an unknown location. If you have any further questions or concerns, please do not hesitate to speak to the doctors or nurses caring for you.

What is a pregnancy of unknown location?

Every ultrasound scan in early pregnancy aims to answer two main questions:

1) Where has the pregnancy implanted? For example is the pregnancy located in the right place (the lining of the womb) or is it an ectopic pregnancy (outside the lining of the womb).

2) Is the pregnancy progressing well or not?

A pregnancy of unknown location means that we cannot confidently visualise the pregnancy on a transvaginal scan and we cannot answer the first question even though you had a positive pregnancy test.

Sometimes there is a suspicion about where the pregnancy is (pregnancy of unknown location – likely intrauterine or pregnancy of unknown location – likely ectopic) but there is not enough evidence on ultrasound to definitely diagnose where the pregnancy is growing.

Identifying where a pregnancy is located is very important as an ectopic pregnancy can be dangerous if not treated or potentially life threatening. About one in five women with a pregnancy of unknown location carry an ectopic pregnancy.

What are the causes of a pregnancy of unknown location?

There are four possible reasons why we cannot locate your pregnancy on an ultrasound

1) You may have a very early normal pregnancy in your womb which is too small for us to see on your scan.

There is a window of about one to two weeks between the urine test turning positive and it being possible to see signs of an early pregnancy on a transvaginal ultrasounds scan. This is most likely to be the reason if you have not had any vaginal bleeding and you are not sure of the date of your last period or the length of your menstrual cycle.

compassionate care

2) Your pregnancy may be growing in your womb but not at the normal rate because it is going to miscarry.

There is no specific time when we would expect to see your pregnancy on a scan if you are going to have a miscarriage. This pregnancy may or may not reach a size that makes it identifiable on ultrasound.

3) You may have an ectopic pregnancy, where the pregnancy grows outside of your womb.

About one in five women with a pregnancy of unknown location have an ectopic pregnancy. An ectopic pregnancy may not be easily visible on an ultrasound scan. There is no specific time or hormone level that tells us when we should be able to see an ectopic pregnancy on a scan.

4) You may have already had a miscarriage during period-like or heavy vaginal bleeding.

What happens next?

If you had a pregnancy of unknown location, you will need to be followed up until either:

We are confident about the location of the pregnancy in a pregnancy that is progressing
or
you have a negative pregnancy test if your pregnancy is not progressing

Follow up may take a few days and sometimes up to a couple of weeks. Follow up may be over the phone or by face-to-face consultation with a doctor or an early pregnancy nurse. No specific treatment is required until we determine the location of the pregnancy.

During this time it is very important that you contact us if you have strong pains in your tummy, heavy vaginal bleeding or diarrhoea, as these can be signs of a ruptured ectopic pregnancy that may require urgent attention and treatment. You can find our contact details at the bottom of this leaflet.

Initially you will need to have two blood tests 48 hours apart. These blood tests measure one of the main pregnancy hormones in your blood, called BHCG. The rate of rise or fall in this hormone levels, combined with your symptoms, will help us understand whether the pregnancy is progressing or not and will determine your follow up:

- A significant rise in the pregnancy hormone means that the pregnancy is progressing and we should be able to visualise the pregnancy on a repeat scan a few days later.

- A sharp fall in the hormone levels means the pregnancy is resolving, regardless of where it is located. In that case you will be asked to have a pregnancy test in three weeks and contact us again if it is still positive. The vast majority of these pregnancies are implanted inside your womb but the will never grow to a size that is visible on ultrasound.

- If the pregnancy hormone levels do not rise or fall significantly you may require more prolonged follow up with monitoring of the BHCG levels, further transvaginal ultrasound scans or a different blood test (progesterone levels). You may also be referred to the early pregnancy consultant for an ultrasound scan and review of your history, ultrasound images and blood tests.

Will I require any treatment?

No specific treatment is required until we determine the location of your pregnancy, as management of a pregnancy inside the lining of your womb is very different to the management of an ectopic pregnancy.

We will never offer you any treatment that could harm a potentially viable pregnancy, even if that means that we have to follow you up for a little longer.

On rare occasions, when a pregnancy is clearly non-viable but we have not been able to locate it over a period of time, we may offer you treatment as if you had a miscarriage or treatment as if you had an ectopic pregnancy. The type of treatment will depend of review of your history, symptoms, ultrasound and blood test results, after discussion with you and the consultant.

What if I have more questions?

We will be more than happy to answer any further questions you may have during your appointment, or clarify anything that you do not understand after reading this leaflet.

What shall I do if I have a problem or concerning symptoms?

If you have any problem, or concerning symptoms at any time during your follow up please:

- Contact the **Gynaecology Assessment Unit (GAU)** at Calderdale Royal Hospital Telephone No: 01422 224416 if you need any advice between the hours of 8.30am –7.00pm weekdays, and 9.30am –1.00pm during the weekends.
- Out of hours you can contact ward 4C in Calderdale Royal Hospital (Telephone No: 01422 224415)

Alternatively you can:

- Contact or visit your GP
- Call NHS 111
- Go to your nearest Accident and Emergency (A&E) Department or call 999 in the event of an emergency.

If you have any comments about this leaflet or the service you have received you can contact :

Ward Manager, Ward 4C/GAU
Calderdale Royal Infirmary
Telephone No: 01422 224475

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

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