

Ref: FOI/CAD/ID 3169

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Freedom of Information Act 2000

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to ectopic pregnancy treatment.

TREATMENT OF ECTOPIC PREGNANCY IN YOUR UNIT.

In relation to the last 12 months:

Do you offer systemic methotrexate as a first-line treatment to women who are able to return for follow-up and who have all of the following:

- no significant pain, and an unruptured ectopic pregnancy with an adnexal mass smaller than 35 mm with no visible heartbeat
- a serum hCG level less than 1500 IU/litre?

Do you offer the choice of either methotrexate or surgical management to women with an ectopic pregnancy who have a serum hCG level of at least 1500 IU/litre and less than 5000 IU/litre, who are able to return for follow-up and who meet all of the following criteria:

• no significant pain and an unruptured ectopic pregnancy with an adnexal mass smaller than 35 mm with no visible heartbeat?

What percentage of women have surgical treatment of their ectopic pregnancy performed by laparotomy?

What percentage of women have surgical treatment of their ectopic pregnancy completed laparoscopically?

What percentage of women have surgical treatment of their ectopic pregnancy initiated laparoscopically and converted to laparotomy?

Do you always have the correct equipment available to allow the laparoscopic treatment of ectopic pregnancy?

Do you perform salpingectomy for women with an ectopic pregnancy and no clear risk factors for infertility?

Do you perform salpingotomy for women with risk factors for infertility? Please estimate the % of surgeons operating on ectopic pregnancies who you think can competently and confidently perform a salpingotomy? What equipment / organizational / training issues could improve the laparoscopic treatment of your patients with an ectopic pregnancy?

TREATMENT OF ECTOPIC PREGNANCY IN YOUR UNIT.	HOSPIT		Tui Tru	Maidstone and Tunbridge Wells NHS Trust	
In relation to the last 12 months:		Yes/No/%		Comments / explanation	
Do you offer systemic methotrexate as a first-line treatment to women who are able to return for follow-up and who have all of the following: • no significant pain, and an unruptured ectopic pregnancy with an adnexal mass smaller than 35 mm with no visible heartbeat • a serum hCG level less than 1500 IU/litre?		YES		Very few women will have MTX in our unit	
Do you offer the choice of either methotrexate or surgical management to women with an ectopic pregnancy who have a serum hCG level of at least 1500 IU/litre and less than 5000 IU/litre, who are able to return for follow-up and who meet all of the following criteria: • no significant pain and an unruptured ectopic pregnancy with an adnexal mass smaller than 35 mm with no visible heartbeat?		YES			
What percentage of women have surgical treatment of their ectopic pregnancy performed by laparotomy?		3.8%			
What percentage of women have surgical treatment of their ectopic pregnancy completed laparoscopically?		85%			
What percentage of women have surgical treatment of their ectopic pregnancy initiated laparoscopically and converted to laparotomy?		< 1%			
Do you always have the correct equipment available to allow the laparoscopic treatment of ectopic pregnancy?		YES			
Do you perform salpingectomy for women with an ectopic pregnancy and no clear risk factors for infertility?		YES			
Do you perform salpingotomy for women with risk factors for infertility?		YES			
Please estimate the % of surgeons operating on ectopic pregnancies who you think can competently and confidently perform a salpingotomy?		**			
What equipment / organizational / training issues could improve the laparoscopic treatment of your patients with an ectopic pregnancy?				**	

^{**} This question does not fall within the Freedom of Information Act. The Act covers any recorded information that is held by a public authority in England, Wales and Northern Ireland, and by UK-wide public authorities based in Scotland. Information held by Scottish public authorities is covered by Scotland's own Freedom of Information (Scotland) Act 2002.