SINGLE DOSE METHOTREXATE IN THE TREATMENT OF ECTOPIC PREGNANCY
H. Grigoryan

Introduction.
The objective of this study was to determine the efficacy of single dose methotrexate (MTX) treatment for ectopic pregnancy.

Materials and Method.
22 patients diagnosed with ectopic pregnancy and treated with single dose MTX between July 2007 and July 2013 were reviewed retrospectively. All patients received MTX in a dose of 1 mg per kg of body mass. There were no patients with a baseline serum beta-hCG titer > than 5000 mIU/ml, an ectopic gestational mass of >4 cm on ultrasound or by the presence of fetal cardiac activity demonstrated on ultrasonography.

Results:
The mean pre-treatment beta-hCG level was 1,570 +/- 1,820 mIU/ml. 12 of the 22 patients (54.5%) were successfully treated with a single-dose of MTX. 4 of the 22 (18.2%) patients required a second dose 48 hours later after the first injection and 3 (13.6%) patients received three doses. Overall 19 of the 22 patients (86.4%) were successfully treated with single or multi dose MTX. Other 3 out of 22 (13.6%) patients underwent surgical treatment. The mean pre-treatment beta-hCG level was significantly lower in patients who were successfully treated with single dose MTX than in patients who treated with multidose or failed MTX therapy (1,032 +/- 1,361 mIU/ml(single dose) vs 1,420 +/- 1,573 mIU/ml(multidose) vs. 2,225 +/- 1,690 mIU/ml (failed treatment) respectively, p<0.05), underscoring the need for careful monitoring and selection of patients.

Conclusions
Methotrexate therapy of ectopic pregnancy is an effective treatment option for selected patients with unruptured tubal ectopic pregnancy.