How can I help reduce Healthcare Associated Infections?
Infection control is important to the wellbeing of our patients, and for that reason we have infection control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. We ask that you, and anyone visiting you, use the hand sanitiser available at the main entrance of the hospital and at the entrance to every clinical area before coming into and after leaving the clinical area or hospital. In some situations hands may need to be washed at the sink using soap and water rather than using the hand sanitiser. Staff will let you know if this is the case.

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What is a Molar pregnancy?
A molar pregnancy, or hydatidiform mole, is a pregnancy in which the placenta develops into a ‘grape’ like appearance. It grows in an uncontrolled fashion to fill the womb. It occurs in about 1 in 1200 pregnancies.

Sadly a molar pregnancy is a form of early pregnancy loss. This means there is no possibility that your pregnancy can survive.

There are two types of molar pregnancy: a complete and a partial hydatidiform mole.

• Complete Mole
Complete mole is when a sperm merges with an empty egg. In this case the cells are derived entirely from the father. When this fertilised egg grows, no embryo is present in the pregnancy sac, only the placenta.

• Partial Mole
These are much more common. In this condition the egg allows two sperm to fertilise it. The embryo has three sets of chromosomes instead of the usual two so the pregnancy cannot survive.

How is a Molar pregnancy diagnosed?
Ultrasound scan and blood pregnancy hormone level (BhCG) may suspect a molar pregnancy, but the final diagnosis is when the tissue is examined by the Pathologist.

Will I have any symptoms?
A molar pregnancy will probably bleed and the womb will seem bigger than it should be. Sometimes it can cause high blood pressure and thyroid problems. There may be increased nausea.

How is a Molar pregnancy treated?
You will be admitted to hospital to have a surgical evacuation of products of conception (SMM) under general anaesthetic.
Do I need any further follow up?
Yes, once the molar pregnancy is diagnosed by histology, you will usually be followed up by Charing Cross Hospital, London until you have a negative pregnancy test, at least 6 months.
You will be registered at Charing Cross Hospital and you will receive a letter from the follow-up centre confirming your registration for follow-up care. The hospital will organise all your blood and urine tests from London. You do not have to travel to London for the tests, these can be taken at your GP surgery. The minimum period for follow-up of complete and partial moles is 6 months.
Blood tests will measure the levels of the pregnancy hormone (BhCG) and are taken weekly following a confirmed molar pregnancy, then they will follow up by testing your urine. It is important to be followed up properly as occasionally the molar tissue may persist and grow deeper into the wall of the uterus and spread. This is then called an invasive mole.
Very rarely a hydatidiform mole can develop into a choriocarcinoma which is a form of cancer and whilst the cure rate is almost 100%, it is important that you attend any follow up appointments arranged.

When can I get pregnant again?
You will have to wait 6 months after the BhCG levels have returned to normal. The reason for this is that it will become difficult to know if your BhCG levels are rising due to pregnancy or re-growth of the mole.

What contraception can I use?
It is not advisable to use the coil or hormonal contraception such as the pill because if your BhCG levels are still above normal, use of the pill may prolong the life of any remaining molar tissue. Condoms or caps should be used.
What are my chances of another Molar pregnancy?
The chances of having a perfectly normal pregnancy are very good. The risk of a further molar pregnancy is low (1 in 55).

Useful contact numbers

**Wycombe Hospital**
Early Pregnancy Unit (EPU) Clinic 8.00am—1.00pm
Monday—Friday
01494 425553

**Stoke Mandeville Hospital**
Early Pregnancy Unit (EPU) Clinic 8.00am—5.00pm
Monday—Friday
EPU Nurse/EPU Bookings 01296 316469
Reception 01296 316264
Ward 16B 01296 418111/8110
Surgical Assessment Unit (SAU) 01296 316500

Further help and advice:
The Miscarriage Association
c/o Clayton Hospital
Northgate
Wakefield
West Yorkshire WF1 3JS
Tel (Helpline): 01924 200799
Web: www.miscarriageassociation.org.uk

The Gestational Trophoblastic Tumour Screening Unit
Department of Medical Oncology
Charing Cross Hospital
Fulham Palace Road
London W6 8RF
Tel: 020 8846 1409
Email: hmole-chorio@hhnt.nhs.uk