



## **Low hCG or Progesterone in Early Pregnancy - Patient Information**

This information pamphlet is intended for patients who have been told their pregnancy test was positive, but the pregnancy hormone levels (hCG or Progesterone) are lower than expected.

We understand that this news may be difficult to cope with and hard to understand. If you have further questions after reading this pamphlet, you may always contact your physician's office.

### **What is an hCG level and why is it necessary to check it?**

hCG stands for human Chorionic Gonadotropin. It is a hormone produced by the placenta, which supports a pregnancy. Progesterone is also produced in an early developing pregnancy. Both of these levels normally increase during the first trimester of pregnancy. Checking both levels together gives your doctor some information on what is happening with your pregnancy.

It is important to know that there is no "right" level for a pregnancy. Different women will have different levels at the same stage of pregnancy (gestational age) and even the same woman will have different levels from one pregnancy to another. Instead, it is important to see how the level changes over time, so your doctor will likely request repeat bloodwork in a few days time. Your hCG level may rise, stay about the same, or begin to fall. In general, a typical hCG level will double every 48-72 hours. If this does not occur, close follow-up is required.

### **What does a low level mean?**

You are currently pregnant; however it is too early to know how the pregnancy will turn out. Possibilities include:

1. A VERY early pregnancy that will end up developing normally.
2. Miscarriage/Biochemical pregnancy
  - a. Miscarriage is also known as a spontaneous abortion. It happens when an embryo stops growing before 20 weeks. Symptoms may include lower abdominal cramping, vaginal bleeding, or no symptoms at all.
  - b. When an early pregnancy is lost before anything can be seen on ultrasound, we call this a "biochemical pregnancy". It is a type of very early miscarriage.
3. Ectopic pregnancy
  - a. This is an abnormal pregnancy which develops outside of the uterus, most commonly in the fallopian tube. This type of pregnancy cannot continue because it can cause the tube to bleed and put you in danger. If you have an ectopic pregnancy your doctor will likely recommend either medication or surgery to treat it.



b. Signs and symptoms of an ectopic pregnancy include:

- light bleeding/spotting from the vagina
- stabbing pain in your abdomen, usually lower abdomen on the right or left side
- dizziness/fainting
- nausea/vomiting
- pain in your shoulder (can indicate internal bleeding)
- sometimes there will be no symptoms if an ectopic pregnancy is diagnosed very early

### **What next?**

You will be asked to do more bloodwork to reassess your hcg and progesterone levels. You may also be asked to come for an ultrasound to look at the uterus and fallopian tubes. However, an ultrasound may not be helpful very early on, because the pregnancy is still too small to see.

### **What do I watch for?**

If you have any of the signs of ectopic pregnancy listed above, or heavy vaginal bleeding, you should be assessed. Heavy vaginal bleeding is a reason to go directly to the hospital. Heavy vaginal bleeding is soaking through two pads in one hour or one pad per hour for two or more hours. If you are unsure, you may call your doctor or the doctor on call for advice.

### **Takeaway Points**

1. Low levels of hCG or progesterone are not always a cause for concern. A successful pregnancy is possible with lower than expected hCG or progesterone levels.
2. Checking the levels over time can help determine if the pregnancy is developing normally.
3. Even if the low hCG does lead to a miscarriage or an ectopic pregnancy, a woman may still be able to get pregnant again.

### **Contact information:**

613 686-3378 or 1-855-596-6755

### **Physician Office Nurses' Extensions (for patients NOT in IUI or IVF treatments):**

636 – Dr Haebe; Dr Kotarba; Dr Gale

637 – Dr Vause; Dr Shmorgun; Dr Jackson

### **IUI Patients – 7 days/week**

617 – Nurse Hotline

### **IVF patients**

#### **Team nurses Monday – Friday:**

Dr. Shmorgun / Dr. Vause – **ext. 108.**

Dr. Haebe / Dr. Jackson /Dr. Magee – **ext. 105.**

Dr. Kotarba / Dr. Gale – **ext. 107.**

**On weekends call ext. 617 or emergency line**

### **Medical Emergencies after hours**

**613-722-7000** – page the IVF physician on-call or go to the nearest emergency department