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## Treating Infertility

Many couples who want to have a child have not been able to do so. About 15% of couples in the United States are infertile. Before you are treated for infertility, you and your partner must be evaluated by a doctor. This may help pinpoint the cause or causes of infertility. The type of treatment you receive depends on the outcome of your evaluation.

### Causes of Infertility

For healthy, young couples, the odds are about 20% that a woman will conceive during any one menstrual cycle. This figure starts to decline in a woman's late 20s and early 30s and decreases even more after age 35. A man's fertility also declines with age, but not as early.

Infertility may be caused by a problem with the woman, the man, the couple, or their lifestyle. Infertility may be caused by more than one factor. Sometimes a cause of infertility cannot be found. Whether the problem is with one or both members of the couple, there are a number of treatment options. If the problem is linked to lifestyle, there are things you can do to help. For instance, your doctor may suggest you change when and how often you have sex. You may need to lose or gain weight, or stop smoking. You may need to avoid being exposed to certain chemicals or substances.

Medical treatment may be needed to help you become pregnant. If so, you should be aware of what is involved. Some treatments require a great deal of expense and effort from both partners. You may want to check your health insurance to see if you are covered. You should also know the expected success rates and how success is defined. Some clinics define success based on the number of live births. Others define it based on the number of pregnancies achieved. Discuss with your doctor the success rates of your options.

### Treatments

If the cause of infertility is with one partner, then that partner can be treated. Medication may be given, surgery may be needed, or assisted reproductive technologies may be used. In some cases, treatments are combined to improve results. For instance, medication and insemination may be used at the same time.

- *Ovulation induction.* If the woman does not ovulate, she may be given certain medications to cause ovulation to occur. She also can be given medication to increase the number of eggs released. The medication used most often is clomiphene citrate. It is a pill given by mouth to cause an egg to be released in women who have problems with ovulation. A number of treatment cycles may be needed, and dosage and medication may need to be altered. If pregnancy does not occur after several treatment cycles of clomiphene citrate, medication may be given by injection. This medication is called human menopausal gonadotropin (hMG). It stimulates the ovaries to mature and produce eggs. Blood tests and ultrasound often are used to monitor hMG treatment. Most women who take ovulation-induction drugs respond to the treatment and begin to ovulate regularly. If no other problems need treatment, more than half become pregnant within 6 cycles. If a woman still hasn't started ovulating, she may have special tests done to find out why. Multiple pregnancy may occur with the use of these drugs. The risk is higher with some drugs than with others. Rarely, a condition called ovarian hyperstimulation syndrome may

occur. To prevent problems, if your doctor finds that too many eggs are developing, he or she may decide not to release the eggs.

- *Surgery.* Surgery may be done to open tubes or repair other problems of the reproductive organs. It may be done to remove growths such as polyps or fibroids. Surgery also may be done to remove scarring that occurred as a result of a previous surgery, infection, or endometriosis. If endometriosis is found, surgery may be done to treat it. Success rates depend on the nature and extent of the problem.
- *Assisted Reproductive Technologies.* Assisted reproductive technology (ART) includes treatments that involve a lab treating and using human eggs and sperm or embryos to help an infertile couple conceive a child. Following are some of the ART treatments available to couples trying to conceive.
  - *Insemination.* Insemination (placing sperm in a woman's vagina by means other than sex) is an option to treat infertility in the couple. In most cases, the sperm are treated in a lab to increase the chances for fertilization. Around the time of ovulation, the sperm are placed into the vagina, cervix, or uterus by the doctor. The woman's partner or a donor may provide the sperm for insemination. It depends on the nature of the problem. Semen from a donor is frozen while the donor is checked to be sure he is free of genetic disorders and some sexually transmitted diseases, including HIV.
  - *In Vitro Fertilization.* With in vitro fertilization (IVF), eggs from the woman and sperm from the man are fertilized outside the body in a lab. The fertilized egg is then placed in the woman's uterus to grow. For IVF, the eggs are removed from the ovary just before ovulation. Medication most often is used to cause more than one egg to mature. Eggs may be removed by laparoscopy, or by inserting a needle into the ovary under ultrasound guidance. The eggs then are combined with sperm and watched to see if fertilization occurs. Either your partner's or a donor's sperm is used. A few days later, one or more fertilized eggs are placed in the woman's uterus through her vagina. This is called embryo transfer. The unused fertilized eggs can be frozen and stored for later use. The success rate of IVF depends on the woman's age and the reason for the infertility. IVF is costly, and its possible side effects are the same as those from ovulation medications or procedures.
  - *Gamete Intrafallopian Transfer.* Gamete intrafallopian transfer (GIFT) is an option similar to IVF. During laparoscopy, a mix of eggs and sperm is injected into the fallopian tube, where fertilization may result. GIFT has about the same success rates as IVF, but is more costly.
  - *Intracytoplasmic Sperm Injection.* With intracytoplasmic sperm injection (ICSI), one sperm is placed directly into an egg to fertilize it. First, sperm are removed from the semen. Then one sperm is injected into each egg's center. They are checked to see if the eggs are fertilized. Once fertilized, the eggs are placed in the woman's uterus to grow, or they are frozen for later use. This technique is fairly new and little is known about any long-term effects.

### Other Choices

You and your partner should give careful thought to all your options. You may want to think about other choices, such as adoption or child-free living. Discuss your feelings with your partner. Sometimes counseling can help to sort out these feelings. Support groups with other infertile couples also may help.