

Information about

Services Available at Assisted Conception Services (ACS)



Assisted Conception Service

Clinic Area B, Ground Floor
Queen Elizabeth Building
Glasgow Royal Infirmary
16 Alexandra Parade
Glasgow G31 2ER

 **0141 211 5675**

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Introduction

Welcome to the Assisted Conception Service (ACS) at Glasgow Royal Infirmary (GRI). We work in partnership with Glasgow University Department of Obstetrics and Gynaecology and have been providing a wide range of fertility treatments since 1985.

You have been referred to ACS at GRI because you are experiencing difficulty in achieving a pregnancy and therefore need some help.

Many people are nervous when they first seek help because they are unsure of what to expect. This booklet will answer some of your questions about fertility treatment and act as a general guide to the services available at ACS.

General Health Information for Couples

We will give you general dietary advice because the success of assisted conception treatment is increased if you are in the best possible health. To be eligible for NHS treatment:

- Couples must have been living together in a stable relationship for a minimum of two years.
- The female partner must have a BMI above 18.5 and below 30. Couples should be aware that a normal BMI is best for both partners.
- Both partners' must stop smoking as least 3 months before starting treatment and must not smoke during treatment.
- Both must not take illegal and abusive substances.

Counselling

We offer counselling to each individual and couple attending this service. This can help you through the investigations and treatments. You can make an appointment for our Counsellor by telephoning **☎ 0141 211 4218 or 4787** or a doctor or nurse at ACS can arrange an appointment for you.

The counselling is confidential and independent of the service.

Most of the nurses working at ACS have counselling skills and can also provide support and information.

Investigation of Female Fertility (Ovarian Function)

We have several clinics which deal with female fertility problems and we encourage your partner to attend these clinics with you.

During your first appointment we will:

- Discuss your infertility investigation results
- Take details of your medical history
- Request other investigations (e.g. blood tests)

These are all to help decide the most appropriate treatment for you.

We will also give you a full description of what assisted conception treatment involves. This includes considering the welfare of a child that may be born as the result of treatment and the impact that child may have on the family group.

Ovulation Induction and Intra-uterine Insemination (OI and IUI)

This treatment involves the stimulation of the ovaries with daily hormone injections (hence the term 'Ovulation Induction'). This can be useful for women who have unexplained infertility or problems with ovulation. We then monitor you regularly using blood samples (to check hormone levels) and transvaginal ultrasound scans (to observe the ovarian response).

Usually after 6 - 10 days of treatment, we will give you a booster injection of a different hormone to mature the eggs, which will then be released into the fallopian tubes.

When appropriate we will prepare a sample of your partner's sperm (or, if applicable, donor sperm) ready to be inserted into the uterus (hence the term 'Intrauterine Insemination'). This is done using a fine catheter (tube), a technique similar to having a cervical smear.

We will arrange a date for you to complete a pregnancy test to find out if the treatment has been successful. If it hasn't we may offer you further treatment options at a later date.

Donated Semen Insemination (also known as IUI by Donor: IUID)

Donor insemination is one of the treatments of choice when the male partner is unable to produce sperm, where a genetic defect exists or in the absence of a male partner.

Donated sperm is thoroughly screened for genetically inherited disorders and sexually transmitted diseases. It is then frozen and quarantined according to current Human Fertilisation Embryology Authority (HFEA) guidelines. Wherever possible, the donor's physical characteristics (e.g. hair and eye colouring, height) are matched to those of the receiving couple.

This procedure can happen as an outpatient. If the female patient has a regular menstrual cycle then no drug therapy may be needed.

The donated sperm is thawed and prepared before being inserted directly into the uterus. This is done using a fine catheter (tube), a technique similar to having a cervical smear.

The best time for insemination and conception is when ovulation occurs. This is established by using regular blood tests from the female partner.

We will arrange a date for you to complete a pregnancy test to find out if the treatment has been successful. If it hasn't we may offer you further treatment options at a later date.

In Vitro Fertilisation (IVF)

IVF refers to a treatment where fertilisation of mature eggs is performed in the laboratory. This is by mixing them with a partner or donor's sperm in a sterile dish.

The treatment itself involves stimulation of the ovaries with daily hormone injections while monitoring the response regularly using blood samples (to check hormone levels) and transvaginal ultrasound scans (to observe the ovarian response).

Usually after 10-14 days of treatment, we will give you a booster injection of a different hormone to mature the eggs, which are then collected from the ovaries 36 hours later.

Once the eggs are collected, we will prepare a sample of your partner's sperm (or, if applicable, donor sperm) and mix them with your eggs in an attempt to bring about fertilisation (i.e. formation of an embryo). In 3-5 days, any embryos produced that are of the right quality will be ready for transfer into the uterus.

The transfer procedure itself is quite straightforward and is similar to having a cervical smear. (If there are more embryos than the maximum we are allowed to put in place at any one time, then the remainder may be frozen if they are of a good quality and can be thawed and used in a later treatment cycle.)

We will arrange a date for you to complete a pregnancy test to find out if the treatment has been successful. If it hasn't we may offer you further treatment options at a later date.

Intracytoplasmic Sperm Injection (ICSI)

ICSI refers to a technique in which each mature egg is injected with a single sperm (from a partner or a donor). This procedure takes place in our laboratory. It improves the likelihood that fertilisation will take place. It also may be the treatment of choice if the male partner has a low number of healthy sperm. The procedure is similar to IVF (see above).

Oocyte Donation Programme

Some women who suffer from a premature menopause or who are known carriers of a genetic disorder are suitable for this type of treatment.

In this treatment a known or anonymous egg donor undergoes stimulation of her ovaries using hormone injections, followed by collection of her eggs which are then fertilised using your partner's sperm. Embryos formed in this way are then transferred into your uterus.

We will arrange to give you a pregnancy test to find out if the treatment has been successful. If it hasn't, further treatment options may be offered to you at a later date.

We have very few anonymous egg donors, so the waiting time for this treatment can be very long. If a friend or relative of yours is willing to donate their eggs to you the waiting time can be reduced.

Other services available include:

- storage of sperm for future use
- storage of eggs for future use
- pre-implantation genetic diagnosis

And finally

If you require more information on any of our services or treatments then please speak to any member of the ACS staff.

