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PROBLEM GETTING PREGNANT?

Notes for patients of Dr Alex K H Ooi

Most healthy couples take up to a year of **regular sexual activity** to conceive.

* Note that if a physical problem or disease is present, treatment is needed. Where surgery can help, this is usually performed by key-hole/laparoscopy/MAS approach.

Simple measures to improve chances include a **healthy lifestyle** and best **coital timing**. It helps to improve **sperm quality** by cutting smoking and alcohol intake, keeping the scrotum cool and taking antioxidants & androgens.

Analysis & culture of a seminal specimen is needed to gauge male status and, if needed, a hormone profile. Testicle varicosities, erectile/ejaculatory dysfunction or infections may need to be treated. Sperm entry problems due to the cervix, immune system or uterine position can be overcome by Intra Uterine Injection (**IUI**) of enhanced sperms.

A **normal reproductive tract** and **ovulation** are requisites. The former may be assessed by means of ultrasound (**US**), hysterosalpingography (**HSG**) or minimal access surgery (**MAS ***). Ovulation can be induced by clomiphene citrate and confirmed by urine test (**LH kits**).

Recombinant gonadotrophins (**rFSH**) is more precise for ovulation induction. It is more effective (and at lower dose) and purer than urinary preparations. It is used either by itself or in combination with clomiphene citrate. About 2 weeks of treatment with daily injections for 10 to 12 days is required and support of the second half of your cycle by a progestogen is helpful. For better results, especially if egg collection is the objective, “down-regulation” from day 2 of pre-treatment cycle or shorter duration “antagonists” may be used. Monitoring of response is by ultrasound and/or blood tests.

Screening tests like Hb, Hb electrophoresis, blood group, VDRL, Rubella IgG, HBsAg & Ab, HIV, Urine FEME, Chlamydia and Toxoplasma IgG, PAP smear and hormone profile may be needed prior to any treatment.

If all is well, a few cycles of each method is best prior to contemplating In-Vitro Fertilisation (**IVF**). IVF is best done in conjunction with Intra-Cytoplasmic Sperm Injection (**ICSI**) in event of low sperm count. You may need various procedures like oocyte retrieval, oocyte and sperm preparation, gametes and embryo culture, embryo transfer and freezing of excess embryos for future use. We will provide further information and guidance should IVF/ICSI be required.