Patient Information

Intrauterine insemination with partner´s sperm

COPENHAGEN FERTILITY CENTER

Contact: www.copenhagenfertilitycenter.com
E-mail: info@copenhagenfertilitycenter.com
Phone: +45 33257000

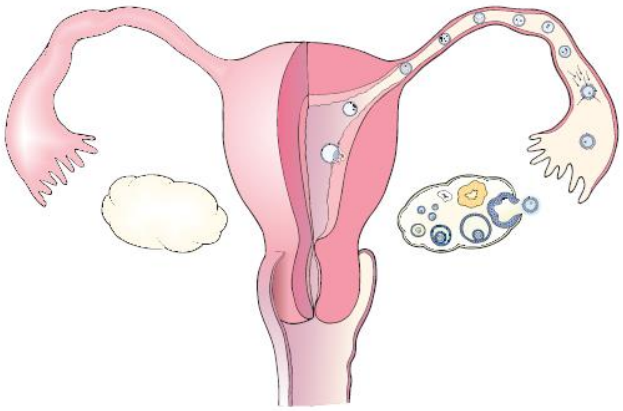
Address: Lygten 2c, DK 2400NV, Copenhagen Denmark

Skodsborg Strandvej 125 A, 2942, Skodsborg

Patient Information

Intrauterine insemination with your partner's sperm is used in the following:

- When the woman has an ovulation, either by herself or after hormone treatment
- When the woman has a normal uterus and normal passage in the tubes
- When the woman has been tested for Chlamydia, smear, rubella, TSH, TPO, prolactin and AMH
- There must be at least one million highly activated sperm cells after preparation
- When both have had blood tests taken for hepatitis B + C and HIV from accredited laboratories



Kindly provided by Organon Denmark

The illustration shows a normal functioning uterus, where there is passage through the tubes and the woman ovulates and the uterus is able to receive the fertilized egg

The treatment

The object of Copenhagen Fertility Center´s procedure for insemination is to inducing one single ovulation. Therefore, we often administrate the following:

- Clomivid tablets (Tamoxifen®). 1 or 2 tablets daily from day 3 to 7 in your cycle, both days included
- Very rarely used, but from day 8 to 12 in your cycle, take one injection of Puregon®/Gonal F® daily, both days included

The medication stimulates the growth of the egg follicles. An ultrasound scan of the egg follicles determines the best time for the insemination. Ovulation is induced with Ovitrelle® when the follicle exceeds a diameter of 17 mm. Insemination is undertaken on the next day, approx. after 36 hours.

The daily treatment schedule

The first day of your menstrual cycle you should call us and book an appointment for an ultrasound scan. The scan shall take place on the 2-3 day in your cycle, if you are having hormone treatment. If you are not having hormone treatment, you should call us on your first day in your cycle and book a scan on your 10-12 day. Our telephone number is +45 3325 7000.

You could also take an ovulation test on your morning urine from day 9.
If the test is **positive**, please call us on +45 3325 7000. You will be inseminated on the following day.

The medical product used and its possible adverse effect

Tamoxifen:

Function: Stimulates the ovaries, resulting in larger and more mature eggs.
Adverse effects: Hot flushes, nausea, blurred sight and headaches. The huge majority of women taking Tamoxifen, however, have no adverse effects.

Puregon and Gonal-f
Function: Stimulates the ovaries, resulting in larger and more mature eggs.
Adverse effect: Local soreness in the area of injection. Risk of hyper-stimulation can occur at high dosages.

Ovitrelle
Function: Matures the eggs in the final stages as well as causing ovulation.
Adverse effect: None of importance – except risk of hyper-stimulation if taken with other hormones.

Legislation

Treatment is possible for all couples who are living together and where both can sign the papers of parenthood. The woman should be under 46 years of age. If the couple have a referral from their family doctor, the treatment can be performed free of charge. This also goes for child no. 2 and 3 and so forth.

Blood tests

According to present Danish legislation concerning in vitro fertilisation, all patients treated in a Danish fertility clinic must have the following tests taken by their own doctor:

The woman:

- A cell-sample (ex. PAP smear) from the cervix which is not more than 1 year old at the start of the treatment.
- Hepatitis B and C, i.e.: HbsAg, Anti-HBc and anti HCV.
- anti-HIV 1+2.
- TSH, TPO, rubella and prolactin

The partner:

- Hepatitis B and C, i.e.: HbsAg, Anti-HBc and anti HCV
- anti-HIV 1+2.

These tests cannot be more that 3 months old at the start of the treatment and are to be renewed every 24 months when in treatment.

Patient Information

This note you can give to your doctor, if you have not had these tests taken already. The doctor can send the results directly to the fertility clinic or you can bring them with you when you come. According to European rules of analysis of human tissue it must be clearly stated in which lab the tests have been analysed.

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