
Information IUI – MOH

Medisch Centrum Kinderwens

IUI – intra – uterine insemination – the insertion of sperm cells into the uterine cavity

Information about IUI in a stimulated cycle

Together with your treating physician or nurse, you have decided to start intra-uterine insemination (IUI) with mild stimulation, or are contemplating doing so. In this information brochure you can read more about this treatment.

Aim IUI-treatment

The aim of an IUI treatment with mild stimulation is to raise the chances of getting pregnant during the month the treatment takes place. Raising these chances is dependent on several factors.

Firstly, the focus will be on getting two or three follicles to grow during the cycle the treatment takes place.

In a normal, unstimulated cycle, it is usual for only one follicle to grow. This follicle will grow inside the ovary due to the FSH hormone (Follicle Stimulating Hormone) released by the brain. The growth of several follicles can be achieved through daily injections of FSH. This will result in the release of more than one egg cell during ovulation, raising the chances of conceiving.

Secondly, the insemination will take place on the exact day when you ovulate. This increases the odds of sperm cells fertilizing the egg cell.

Finally the sperm will be processed prior to the insemination (donated sperm is processed prior to being frozen). The most motile of the sperm cells will be inserted into the uterine cavity.

You will decide on the desired number of IUI treatments with mild stimulation together with your treating physician or nurse.

Chances of conceiving

The chances of conceiving a child are 10 to 15% for each cycle when using the partner's sperm, 15% when using donor sperm. These are averages, and influenced by several factors such as age (more so the woman's age than the man's). In addition to that, factors such as weight, smoking, use of alcohol and a healthy diet (for both the man and the woman) each have their part. It's not possible to determine your exact individual odds of conceiving a child.

Side effects and risk of IUI treatment

The most common side effects of using FSH are headaches (seen in 1-2 of every 10 women), stomachache, nausea and/or diarrhea (seen in 1-10 of every 100 women).

Possible local physical complaints include: pain, redness, swelling or itchiness at the injection site (seen in 1-2 of every 10 women). Other than that patients frequently report mood swings, although it's hard to determine whether this is due to the medication or due to the (understandable) stress caused by the treatment.

The most important risk is the possibility of getting pregnant with twins (<5% chance) or triplets (<1%). Sometimes, the treatment needs to be terminated due to your ovaries not responding to the FSH injections as planned. This can cause too many follicles to grow (in less than 5% of treatment), raising the chances of a high-order multiple pregnancy. The dosage of FSH per injection will then be modified accordingly for the next cycle. If this is the case, we advise using a condom while having sex. If necessary, your treating physician will discuss the possibility of using emergency contraceptives to eliminate the possibility of a high-order multiple pregnancy.

Intense period of time

Although physically, insemination is considered to be the least strenuous of fertility treatments, it can well be an intense and emotional period of time for those involved. Not only is there the physical strain, experienced differently by everyone; other factors that can make this treatment a challenge are the planning, the continuous preoccupation with the treatment and the alternation between hope and uncertainty. For the man, the production of sperm for the treatment can be stressful. And the wait post-insemination can be very intense: will or won't the woman menstruate? This may put extra strain on the relationship between partners, and it's important that you do continue to discuss this. Relationships with others, such as family, friends, coworkers and employers can prove to be challenging too. One of our fertility counselors can help you with this. For an appointment you can contact our administration without a referral. This is free.

Practical information

Start of the treatment

On the first or second day of your period, you'll contact the administration to schedule an ultrasound, to take place on the second or third day of your period.

After this ultrasound you'll get a prescription for the necessary medication, which you will receive at our counter. Your treating nurse or physician will explain the starting date for the injections, and the dosage. You'll start administering the FSH injections on this starting date.

How to inject the FSH will be explained to you by a nurse. You can do it yourself, or your partner can do it for you (see the link at the end of this information brochure on how to inject FSH). After several days of FSH injections, you'll schedule another ultrasound. Usually, this will be on the tenth day of your cycle. This ultrasound will be focused on determining the size and number of present follicles.

Timing of the insemination

The actual insemination will be timed by either a positive ovulation test or an Ovitrelle®-injection.

If using ovulation tests:

When the follicle is ready to be released from the ovary, ovulation takes place. Ovulation is caused by the LH hormone (produced in the pituitary gland). It'll take place 24 hours after LH hormone levels in your blood start rising. LH is a protein which is discarded through urine. It is possible to find the LH-peak in the urine through so-called ovulation tests (see the 'LH/Ovulation tests' brochure for further information).

- Aim to do the test after not having urinated for four hours
- Don't drink an excessive amount of fluids prior to testing
- We highly suggest testing at roughly the same time every day. Occasionally, we advise clients to test twice daily; it is of course perfectly fine if you decide to do the same.

We request that you fill out the 'Registration form positive LH test' and email it immediately to positievetest_mckinderwens@tfp-fertility.com. The point in time where the test was positive for the first time is important to the timing of the insemination; we aim to perform the IUI within 24 hours. Our administrative office will send you an email with the scheduled time for your IUI treatment.

In case of a positive LH test:

Today between 6.00 and 09.30:	the IUI will take place that same afternoon
Today between 13.00 and 16.00:	the IUI will take place tomorrow morning
Today between 21.00 and 23.30:	the IUI will take place tomorrow

If using a Ovitrelle®-injection:

Ovitrelle® is hCG (pregnancy hormone). This simulates the LH-peak and thus, it can cause an ovulation. If an ultrasound shows that the largest follicle is at least seventeen millimeters in size, the insemination can be timed using a Ovitrelle®-injection. You can pick up the Ovitrelle® at the pharmacy with a prescription you will be given after this ultrasound. You'll then inject the Ovitrelle® at the time indicated by your treating physician or nurse (for more information on how to inject Ovitrelle®, use the link at the end of this brochure). Insemination will take place 24-40 hours later.

Before the insemination

For the woman: it is a good idea to take 0.4 or 0.5 milligrams of folic acid daily, starting four weeks before your treatment. In addition to this, it's recommended you take vitamin D pills. We advise against use of alcohol or smoking. For more information, go to www.zwangerwijzer.nl.

For the man: the optimal period of abstinence is one to three days for IUI.

The insemination

If using partner's sperm: A separate appointment will be scheduled on the day of insemination for the partner to turn in the sperm. Usually, this appointment takes place one and a half to two hours prior to the insemination itself. You can produce the sperm either in the clinic or at home (you can ask for sperm containers at the front desk). If you decide to produce at home, the sperm must be handed in at the laboratory no more than one hour after production. You need to be able to prove your identity to do so.

If using donor sperm: The frozen sperm will be defrosted right before the insemination.

At the laboratory, several check-up by several employees will take place in order to prevent sperm mix-ups.

The insemination will be executed by one of our physicians or nurses. Using a speculum, the cervix will be exposed. A thin tube will be inserted into the uterus through the cervix. The sperm will be inseminated into the uterus through this tube. The IUI will be easier if your bladder is not entirely empty. This will push the uterus back a little, causing it to be in line with the cervix. The entire treatment won't take more than a few minutes and is hardly ever considered painful.

It has been shown that continuing to lay back after being inseminated doesn't effect your chances of conceiving. You can get up and get dressed immediately after.

After the insemination

Following the insemination, you won't need to use any special medication. You can continue to work, exercise, go to the spa and have sex.

If you don't get your period, fifteen days after being inseminated you can take a pregnancy test. If it returns positive, you need to schedule an ultrasound roughly five weeks after the insemination. If the test returns negative, you do still need to contact the clinic.

If you don't turn out to be pregnant, your period can be expected ten to fourteen days after being inseminated. If you decide to continue treatment immediately, you can schedule another ultrasound, to take place on the third day of your next cycle. If you decide not to continue treatment immediately, we do ask you to report the outcome of your treatment.

If you have any questions at all, you can ask your treating physician or nurse. To do so, please schedule a consultation either in person or over the phone.

Evaluation after non-successful treatment

If there has been no successful conception after three inseminations, you'll be asked to schedule a consultation with your treating nurse or physician. This provides an opportunity to discuss any changes to your course of treatment that you may want or need. We would like to draw your attention to the fact that it is possible that you may have to skip a cycle of treatment during this evaluation period

We're available Monday to Friday via 071-5812300 for:

- Scheduling an ultrasound due to starting your menstruation
- Having a negative ovulation test for six consecutive days

You can also reach us by email. We'll try to get back to you within 48 hours. If your email is urgent, please mention that in the subject.

Our email address is: info_mckinderwens@tfp-fertility.com.

Further information

<https://www.youtube.com/watch?v=pNe43KGZTI8>

(You Tube: schematic representation of a normal menstrual cycle)

<https://www.youtube.com/watch?v=qCdiLLF0vw>

(You Tube: IUI)

http://www.nvog.nl/Sites/Files/0000000095_IUI.pdf

(NVOG's information on IUI for patients)

<http://www.zwangerwijzer.nl>

(Lifestyle tips)

https://www.youtube.com/watch?v=m8gOZ7l_Jq4

(You tube: Instructions on how to use Gonal F)

<https://www.youtube.com/watch?v=vVA-4da9xic>

(You Tube: Instructions on how to use Fostimon)

<https://www.youtube.com/watch?v=Dj4v-CM2bcs>

(You Tube: Instructions on how to use Ovitrelle®)

<https://youtu.be/v48R-bvd5f8>

[IUI in Medisch centrum kinderwens \(Dutch\)\)](#)

Information brochure: [On using LH tests](#)

This information is meant for women who have been offered the IUI treatment at MC Kinderwens. This information, together with any other information given to you by a physician or nurse, is meant to help you make an educated choice on whether you want to take the treatment. This information is subject to change.

For any feedback regarding this information brochure, please let us know at info_mckinderwens@tfp-fertility.com.