

KINDERWUNSCHZENTRUM LUDWIGSHAFEN

A child is one of life's greatest gifts. What can be done if this gift fails to materialise though?

Many couples dream about having their own baby and wonder why the pregnancy they yearn for doesn't work out. This is not a reason to despair. Thanks to modern medicine there are a number of ways to fulfil your wish of having children nowadays. Since our foundation, many couples have been rewarded by putting their faith in our work here at the Ludwigshafen Fertility Centre (Kinderwunschzetrums Ludwigshafen)

We would like to give you an insight into our fertility treatment procedure:

INITIAL CONSULTATION

It is a big advantage if both partners can take the time to come along to the initial consultation. In some cases the kind of treatment can be decided upon after the first consultation – which you should plan around one hour for. In most cases, however, further examinations are required in order to select the best course of action and treatment.

A physical examination of the woman is carried out. In addition to this, blood tests or a sperm analysis is arranged. These examinations are planned according to a pre-arranged timetable which is designed on an individual basis.

It is important for us that you raise any questions you might have and are able to address relevant subjects. You can be certain that we will take any fears or anxieties you may have seriously at all times.

What should you bring with you to the initial consultation?

- Please bring along all previous test results. This will enable us to start the treatment quickly.
- Statutorily insured patients should bring a referral from their gynaecologist, GP or urologist if you come as a couple then from both partners.

DIAGNOSIS

Sample examinations for women would be:

Hormone Analysis

Hormonal imbalance is a common cause of infertility. Consequently, a hormone analysis is unavoidable. Generally speaking, a blood sample taken at the right time is enough to check this.

Following this, the next course of action is normally to check on the male and female sex hormones. As other hormonal anomalies – like a thyroid dysfunction for example – can also be a cause of the infertility, it often makes sense to check other hormones as well.

In the case of artificial insemination (IVF or ICSI insemination) being the chosen course of action and best chance of success, the current directives, in accordance with certain additional serological investigations, have to be followed. We feel it is important to avoid unnecessary examinations and to minimise the stress on you.

Ultasound Examination

Changes in the abdomen of a woman, like uterine fibroids (Myoma) for example, can also be a reason for a pregnancy failing to materialise. These changes, along with congenital malformations, can often be discovered when an ultrasound scan is carried out.

The scan is painless and represents no medical risk (e.g. harmful radiation).

Hysterosalpingo Contrast Sonography (HyCoSy)

Hystero-salpingo contrast sonography (usually shortened to HyCoSy) is a simple and well-tolerated outpatient ultrasound procedure used to assess whether the fallopian tubes are open or blocked, as well as detect abnormalities of the uterus and endometrium. This is done by putting fluid into the uterine cavity, and checking using ultrasound to see whether the fluid flows through the fallopian tubes and spills around the ovaries. In the event of a blockage of the fallopian tube the fluid cannot flow through. This kind of examination can often help avoid the need for a laparoscopy (or abdominal endoscopy) under anaesthesia.



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Laparoscopy (Abdominal Endoscopy)

Should the fallopian tube patency test not provide us with any clear answers or if there is a suspicion of pathological changes – like endometriosis or adhesions in the abdomen, for example – then a laparoscopy would be a sensible next step.

The endoscopy is a short surgical procedure that is carried out under anaesthesia. A thin camera is inserted through a cut (incision) in the belly to look at abdominal changes and correct immediately, if necessary.

The patency of the fallopian tube can be checked during the endoscopy by injecting a colour solution into the uterus. If the colour solution flows into the abdominal cavity then it can be concluded the fallopian tube(s) are working normally. If the colour solution does not flow through the fallopian tube and into the abdominal cavity, then we can assume that there is a blockage.

Examples of examinations for men:

Semen Analysis

Although it is the woman in the partnership who does not get pregnant, the cause of infertility can just as often lie at the feet of the male partner. Hence, it is necessary to check the man's fertility.

We have a private room in our practice which offers full discretion when providing a sperm sample for analysis. If it is not possible to provide us with a sample in the clinic, this can also be done at home. The sample should be kept in and transported to our clinic in a pot supplied by us. On receiving the sample, our experienced laboratory team will run tests immediately and classify it according to the WHO criteria.

THE THERAPY

As soon as the results of the examination are available, we will decide on the best course of therapy and create an individual treatment plan with you.

Sometimes, the desired pregnancy can be facilitated by correcting a minor hormonal imbalance. Depending on the results of the examination, one of the following methods of treatment could be the best way to conceiving the baby you have dreamed about.

Cycle Monitoring

The monitoring of your cycle is an integral part of hormone stimulation therapy and is also a common part of other treatment methods. Together with your help, the ideal time to induce ovulation can be determined.

Hormonal Stimulation Therapy With Planned Intercourse

Is your period irregular? It is not always necessary to carry out invasive treatment right away. Often hormonal aids are sufficient, at first, to regulate the natural cycle of the body. If the cause of infertility is an impairment in the maturing of eggs, hormone stimulation therapy can be of help. We can then help by pinpointing the best time for you to have intercourse. Hormonal stimulation also provides a basis for artificial insemination, albeit mostly in a higher dosage.

Intrauterine Insemination (IUI)

This treatment involves placing your partner's 'washed' sperm inside the uterus to fertilise eggs. The method considerably shortens the sperm's journey and can allow a natural fertilisation to take place even in the case of a low sperm count or mobility. The treatment itself takes only a few minutes and you will feel almost nothing at all.



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Donor Insemination

If none of the available therapies have resulted in success, donor insemination, using deep frozen semen from a sperm bank, could be considered.

If you decide on this method, we will try to find a donor from our sperm bank that has the most similarities with your partner (eye colour, build etc.). The sperm donor will have already been tested for infectious diseases and, thereafter, the sperm is transported to us in a deep-frozen state. After ,washing' the sperm in our laboratory, the insemination can take place. This process is no different to using a partner's sperm for insemination.

Before the therapy can begin, the parents of the future child have to be officially named and certified by a notary in order to relieve the donor from future maintenance claims.

In Vitro Fertilisation and Intra-Cytoplasmic Sperm Injection (IVF/ICSI)

In vitro fertilisation (IVF) is the process of fertilising eggs outside of the body. The sperm cell penetrates the egg by itself which initiates fertilisation. This form of treatment is used when the fallopian tube is blocked, for example.

Intra-cytoplasmic sperm injection (ICSI) is used when your sperm needs some help to fertilise an egg. For example, you may have a low number of sperm or they might not be moving quick enough. In this case the sperm will not fertilise the egg by itself. We have a high rate of success using this method and have been able to help many couples fulfil their dream of having a baby.

Treatment timeframe for IVF or ICSI therapy

- Hormone stimulation: Approx 10–14 days
- Egg collection: Takes approx. 15 minutes and is done on an outpatient basis in our clinic under anaesthesia. Afterwards we advise resting in our relaxation room for approx. 2 hours.
- Embryo transfer back into the uterus: 2-5 days after the egg collection.

THE RESULT

We will carry out a pregnancy test with you 14 days after the embryo transfer – and will be delighted if it turns out to be positive.

An ultrasound examination will follow a further 14 days after this, in which it is often possible to see the embryo already. Your gynaecologist will then provide support from this point on in the pregnancy. We are, of course, available to answer any questions you may have at any time. Feel free to get in touch and we will be happy to help.

If we have awoken your interest, you can call us to arrange an initial consultation on: 0049 (0)621/59298688 or send us an Email to info@kinderwunsch-lu.de, we will ring back as soon as possible.

We look forward to hearing from you.

The Ludwigshafen Fertility Centre Team