

### IVF (In Vitro Fertilization)

The specialist may decide that the only treatment option is IVF. This is the recommended treatment option for some types of infertility such as male factor, tubal blockage and unexplained.

The NHS funding criteria for IVF is **very strict** and is only available in the following circumstances;

- The couple have not had any children of their own even if this is with a previous partner, and includes adopted children
- The woman's BMI must be less than 30 and above 19. If the BMI is higher than 30 she will be asked to lose weight before a referral for IVF can be made
- The couple have been in a living together for more than 2 years.
- If the infertility is unexplained, the couple must have been trying for more than 2 years to access funded treatment. Once an assessment of unexplained infertility is made you may be asked to wait until you have been trying for 2 years before funded IVF can be accessed
- Neither partner must be sterilized.
- For same sex couples to be eligible for NHS funding there must be a medical reason for infertility: for example blocked fallopian tubes.
- For women from 40-43yrs old there are some restrictions for NHS funding.

If you are not entitled to funding for IVF treatment the fertility specialist will give you as much information as possible about private treatment options before discharge.

## Assessment and Treatment of Fertility Problems in Hull and East Yorkshire Hospitals

In the UK around 1 in 7 couples may have difficulty in conceiving, this is approximately 3.5 million people in the UK

There are 2 types of infertility affecting couples:

primary infertility – where someone who's never conceived in the past and has difficulty conceiving.

secondary infertility – where someone has had 1 or more pregnancies in the past, but is having difficulty conceiving again.

There are many possible causes of infertility, which can affect either the man or the woman. But in a quarter of cases it isn't possible to identify the cause and the reason is “unexplained”.

Common causes of infertility include:

- lack of regular ovulation, the monthly release of an egg
- blocked or damaged fallopian tubes
- male factor due to poor quality sperm

### Referral to the Specialist Fertility Team for Assessment

Your GP must refer you to the fertility specialist team as a couple. We cannot accept referrals from single people under any circumstances. Whilst we appreciate it is hard to get time off work together, it is important that you both attend the appointments if possible.

### Body Mass Index (BMI)

To be referred for fertility assessment the woman's BMI (Body Mass Index) must be between 19 and 35. If this is not the case please ask your GP to refer you to a team who can help with weight management. This is because fertility treatment is less successful when the woman's BMI is outside of this range. There are also serious health risks associated with high BMI in pregnancy for both the mother and baby. If you need to lose weight, your referral to the fertility team will be made when your BMI is less than 35.

You may require IVF treatment to help you achieve a pregnancy. NHS funding for IVF treatment is only available to couples where the woman having treatment has a BMI less than 30. The fertility team will not be able to refer you for IVF until the woman's BMI is less than 30.

For women with a low BMI, of less than 19, the couple will be assessed thoroughly before a decision about funding is made.

### Welfare of the Child Assessment

The welfare of any child that maybe born as a result of your fertility treatment is paramount. If your GP has any concerns over the welfare of the child it may delay or prevent your referral to the specialist fertility team. You will also sign a welfare of the child declaration before you are seen in the fertility clinic, thus allowing the team to make an assessment.

You may be asked to provide more information about your personal circumstances to ensure that there are no issues that may impact on the wellbeing of any children born into your family.

### Fertility Assessment

Your GP will perform basic investigations for you that will be assessed at your first appointment with the specialist.

- Semen test for the male partner (if appropriate)
- Progesterone hormone - normally performed 7 days before a period is due.
- Prolactin Hormone – performed at any time in the cycle
- Rubella antibody screening

At your hospital appointment the fertility specialist may order further tests for you including

- Detailed Semen evaluation
- Tubal patency test, to check the fallopian tubes are not blocked
- Anti Mullerian Hormone, as this gives an indication of the number of eggs that are produced by the ovary each cycle
- Ultrasound scan
- Chlamydia screening

Once the fertility specialist has the results of your tests a treatment plan will be formulated for you.

### Fertility Treatment

All patients will be given advice to help them understand how changes in their lifestyle to improve their fertility and what treatment options will help them.

### Ovulation Induction

The specialist may assess that your fertility problem is caused by the woman not releasing an egg each month (not ovulating). In this case the woman can be given a course of medication to help with ovulation. The medication is normally given for 5 days at the beginning of the woman's cycle and a blood test performed each month around day 21 to find out if an egg has been released.