

IHR



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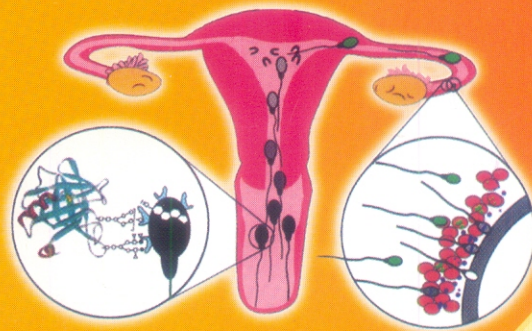
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IHR

Intrauterine Insemination (IUI)



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What is IUI

IUI is painless atraumatic deposition of sperm in the uterine cavity near the fundus around the time of ovulation.

Aim of IUI

1. Bypassing the cervical barrier.
2. To deposit good quality & quantity of sperms in the uterine cavity.
3. To identify the ovulation timing.

Prerequisites of IUI

1. Ovulating female i.e. presence of eggs in the ovaries (patient aged more than 35 years should check their ovarian reserve before IUI by means of hormonal tests i.e. AMH or GAST).
2. At least one patent Fallopian Tube (is checked either by HSG or Laparoscopy).
3. Semen sample should contain sufficient numbers of good quality sperms. Check sperm yield & morphology percentage in semen analysis report.

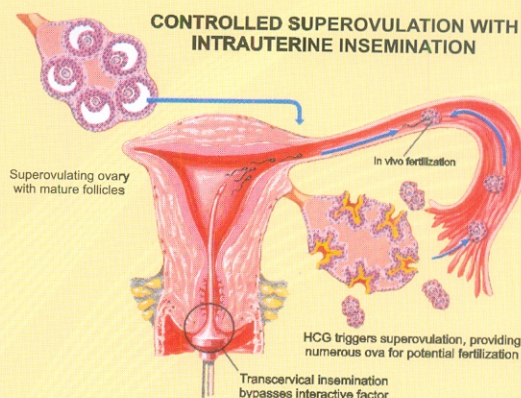
- Ideal sperm yield for IUI - 5×10^6 or more
- Minimum sperm yield at which IUI can be tried - 2×10^6
- Minimum normal sperm percentage - 4%

Who can go for IUI (indications)

1. Patient with Ovulatory Dysfunction e.g., PCOS
2. Patient with mild Endometriosis
3. Patient with Unconsummated Marriage.
4. Immunological Abnormalities.
5. Patient with decreased sperm count.
6. Patient with ejaculatory dysfunctions.
7. Unexplained Infertility.

How is IUI done

Your doctor initially gives you medications for OI for egg formation. Then the female partner only has to come on Day 10 or Day 11 of menstruation for FS. Follicular Study (FS) is the assessment of growth of egg by sonography. Once the egg is matured, one injection (HCG 10000 i.u.) is given for the egg to come out of the ovary (Ovulation). IUI proper is done, 24 hours and 40 hours after injection. Sperms are put inside the uterus using a non-traumatic cannula. The whole process is very simple and not painful. Sometime your doctor may decide to do single IUI, at around 36 hours after injection.



What are the chances of Pregnancy with IUI ? (results)

Pregnancy rates following IUI depends on the indications for IUI. Best results are obtained in patients with unexplained infertility, ovulatory dysfunction, unconsummated marriage or patients with ejaculatory dysfunction. In these cases pregnancy rate per cycle can go upto 15-20%. In other words almost 70-80% couples can expect pregnancy in 6 cycles of IUI. In patients with endometriosis or decreases sperm count pregnancy rate decreases depending upon the severity of the disease.

What is Ovulation Induction (OI).

Medications are given to produce eggs. This is known as Ovulation Induction. In modern infertility management IUI cycles are mostly done with OI.

Usually oral drugs like Clomophine Citrate (C.C.) alone or along with some other drugs is used for OI. But in some patients your doctor might choose to give you few hormone injections too.

How much IUI cost

IUI is basically low cost effective therapy. The overall cost of IUI is usually less than Rs. 10,000/- (Rupees ten thousand only). Our hospital (IHR) offers a package which is between Rs. 4000/- to Rs. 8000/- depending on type of IUI (e.g. AIH or AID). This includes all the Sonography in that cycle required for monitoring the egg growth (Follicular Study), Semen processing, IUI disposables such as media & cannula and insemination by Doctor in uterine cavity.

Patients have to purchase all the medications, used separately during the cycles. The total cost of IUI including medications is usually less than Rs. 10,000/- per cycle. But in case injectable hormones have to be used (e.g. in Poor responders) then the cost may increase.

How long the couple has to stay

Usually the presence of female partner is required from Day 10 or Day 11 of menstruation for 4-5 days. During this period FS is done. The male partner is required only for last 2 days for semen production.

Whether hospitalization or rest required during or after procedure

No hospitalization or rest is required during or after the procedure. The whole procedure is very simple and painless. The female partner has to stay at OPD for two to three hours during the days of F.S. On the days when

insemination is done, the female partner may have to stay at OPD for 3-4 hours. On the days of insemination the male partner can just come and give semen and go back. After insemination, she will take rest on the IUI table for 15 minutes only. No rest is required after finishing the process. The female partner can do routine household work, can travel, can go to work or practically can do all the activities which she is used to do.

Donor IUI

Donor insemination is indicated in case of:

1. Male factor Infertility

- a) Azoospermia with primary testicular failure.
- b) Subnormal sperm parameters like severe, Oligo, astheno, and /or terato zoospermia & Azsoospermia. (when patient cannot afford IVF/ICSI or TESA-ICSI)

2. Risk of transmission of genetic diseases from the male partner.

3. Those who have had multiple failure at ICSI or TESA-ICSI

Screening of Donors

The screening of donor is extremely important in case of donor insemination programs. The following screening of donors is carried out at IHR.

- a) Blood for ABO and Rh grouping
- b) VDRL
- c) HIV, HbsAg (Australia antigen) B and C
- d) Genetic disorders : Thalassemia
(Hb electro phoresis)

A donor is not accepted if there is a history of genetically inherited disorders anywhere in his family.