Understanding Fertility Problems: Assisted Reproduction



Your healthcare provider has suggested assisted reproduction technologies (ART). ART may be needed for certain fertility problems. Or it may be used if other treatments haven't helped. In most cases, these methods use hormone medicines along with other techniques to increase the chances of success. Be sure to talk with your provider about the details, success rates, and costs.

We understand gender is a spectrum. We may use gendered terms to talk about anatomy and health risk. Please use this sheet in a way that works best for you and your provider as you talk about your care.

Transferring embryos

A thin tube called a transfer catheter is used to transfer embryos from the lab into your uterus. This is often done about 3 days after fertilization. In some cases, your healthcare provider may wait 1 or 2 days longer to use a more developed embryo. This embryo is called a blastocyst.

Using frozen embryos

Many embryos are created during an IVF cycle. But only a certain number are placed into the uterus. The remaining embryos may then be frozen for later use. This prevents you from having to go through another cycle of egg stimulation and retrieval.

Sperm donation

If there are problems with your partner's sperm, a donor sperm can be used to inseminate you. The sperm may be from a known donor or a commercial sperm bank. All donors are tested for diseases. This includes HIV/AIDS. They're also tested for genetic diseases, such as cystic fibrosis. Sperm banks allow you to match the donor's physical traits to your partner.

Egg donation

Egg donation may be an option if other treatments don't work. The eggs can come from a known donor, such as a sister. Or they can come from a commercial agency. Like sperm donors, egg donors are tested for sexually transmitted infections and certain genetic problems. You may also match the donor's physical traits to yourself.

Surrogacy

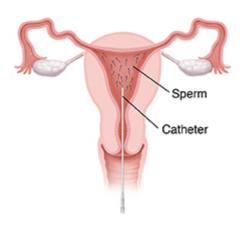
Surrogacy means that another woman carries and gives birth to your child. The child may be conceived with her egg and your partner's sperm. This is called traditional surrogacy. Or the baby may be conceived with your egg and your partner's sperm. This is called gestational surrogacy. Surrogacy can have legal and emotional aspects. Be sure to explore them carefully.

Intrauterine insemination (IUI)

IUI is a fertility treatment. It places sperm in the uterus during ovulation. It can be done in your healthcare provider's office or a clinic. There are 2 main steps in the process:

- First, the man's semen is "washed" in a lab. This separates active sperm from the semen.
- The sperm are then placed inside a thin tube called a catheter. The catheter is inserted through the woman's cervix. The sperm are placed into the uterus.

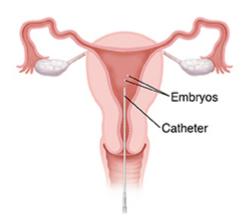
In most cases, IUI is done along with taking hormone medicines. They help with a woman's fertility. This is called a "stimulated cycle." It can also be done without medicines. This is called a "natural cycle."



In vitro fertilization (IVF)

During IVF, sperm and egg are combined outside the body in a lab. There are 4 main steps in this process:

- Medicine is used to stimulate the ovaries. This helps them develop multiple mature eggs.
- The mature eggs are retrieved from the ovaries. This is done by guiding a thin needle through the vagina. You will get medicine (sedation) so that you won't feel any pain.
- Sperm are combined with the eggs in a lab. If there are problems with fertilization, 1 sperm can be injected directly into an egg. This process is called intracytoplasmic sperm injection (ICSI).
- A few days after fertilization, 1 or more embryos are placed into the uterus. Using more than 1 embryo
 improves the odds that at least 1 will implant. But it also means there is a chance of a multiple
 pregnancy.



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