

PATIENT INFORMATION

Reproductive Medicine Clinic

Aim

To provide patients with a better understanding of the care they will receive within the Reproductive Medicine Clinic.

Outcome

Patients and their partners will have the knowledge and understanding of what happens at the initial and ongoing consultations.

Criteria

Patients are referred to the clinic by their GP. Depending upon their age, they should have been trying to get pregnant for 6-12 months through either primary infertility (when you have not conceived before) or secondary infertility (when there has been a previous conception, whether or not the outcome was a live child).

Patients are also referred if they have amenorrhoea (lack of periods) or are within childbearing age and have irregular periods with a suspicion of having polycystic ovarian syndrome (PCOS).

All patients attending the clinic will be assessed for their eligibility for NHS funded treatment. The Unit works to the specific guidance published by Cheshire and Merseyside Specialised Services Commissioning Team (2015). The Policy describes the circumstances in which Cheshire, Merseyside and West Lancashire PCTs will fund fertility treatment and the type of treatments that will be available. It takes the form of conditions under which the NHS will fund treatment routinely. This policy will be discussed in detail with you at your initial consultation.

Clinic Profile

The Reproductive Medicine unit is based at the Ormskirk Hospital site and is located within the gynaecology outpatient department situated on level 2 (ground floor). The clinic has well established links with the Hewitt Centre for Reproductive Medicine which is located at the Liverpool Women's Hospital NHS Foundation Trust, local IVF providers.

The team at Ormskirk comprises of:

- 1 Lead Consultant with a special interest in Reproductive Medicine
- Nursing Sister
- Staff Nurse

Reproductive Medicine Clinics – take place on a Monday morning.

This clinic involves the consultant and nurse. You will be seen by the most appropriate person for your needs.

Scan Clinics - Monday mornings. These are carried out by the consultant or specialist nurse.

Initial Consultation

This is carried out at a telephone consultation or at the clinic held on a Monday morning. The initial consultation will be completed by either the consultant or a specialist nurse.

Your Initial Consultation Involves

- Taking the history from both you and your partner
- Providing you and your partner with health and fertility advice
- Discussing your anxieties and concerns
- Arranging some routine investigations
- Informing you on eligibility for NHS funded treatment

Routine Investigations (Female)

Day 3-5 bloods

Follicle Stimulating Hormone (FSH): a blood test will measure whether sufficient levels of FSH are being produced by your body. FSH triggers the follicles within your ovaries to begin preparing for the release of an egg. High levels of FSH are generally an indicator that egg reserves are running low, although they also signal an overall imbalance of hormones.

Luteinising Hormone (LH): luteinising hormone controls egg development. During ovulation, levels of LH surge in order to trigger the release of the egg. Consistently high levels of this hormone in your body can prevent this increase, and might also be an indicator of polycystic ovarian syndrome.

Prolactin: a blood test will also measure levels of prolactin. Prolactin is a stress hormone that is released by a gland found at the base of the brain known as the pituitary gland. High levels of prolactin can prevent the release of FSH and LH. Prolactin is the hormone that also eventually stimulates the production of breast milk.

Oestrogen: this is a hormone that is found in women and is produced by the ovarian follicle. It causes the lining of the womb (endometrium) to become thicker during the first part of your menstrual cycle.

Rubella: this blood test detects the antibodies which will prevent this infection from occurring in babies during pregnancy. If no antibodies are found, we will liaise with your GP.

Chlamydia: this is a sexually transmitted infection which is a bacterium, often without symptoms in women. However if left untreated can cause damage to the fallopian tubes and pelvic inflammatory disease, which in turn can reduce fertility. This is obtained by a swab inserted into the vagina. This can be done by yourself and the medical team will give instructions.

The bloods will show if you are producing the hormones in the correct quantity at this time of your cycle.

If you are having abnormal periods or we suspect that you may have polycystic ovarian syndrome (PCOS) then we carry out a different range of bloods in addition to those listed above. These include:

- Prolactin
- Androstenedione
- DHEA
- Testosterone
- Thyroid Function
(If irregular cycle)

Day 21-23 Progesterone(Female)

Progesterone: this will determine whether you have ovulated. This blood test is taken a week before your period is due, so the timing will depend on the length of your menstrual cycle.

Routine Investigations (Male)

Semen Analysis: this is carried out at Ormskirk or the Hewitt IVF Centre located at Liverpool Women's Hospital. This test will check your sperm count and determine whether there are any abnormalities in the sperm. You will receive a letter approximately 5-6 weeks later which will tell you if your test results are normal or the test needs repeating.

Do not worry if the test needs to be repeated, you will be sent a letter asking you to repeat it straight away or in 3 months time.

If the second sample is low you may be referred to a doctor who specialises in the study of male reproduction, semen analysis, hormone production and infertility (known as an andrologist or urologist).

Further Investigations

There are a number of investigations that can be done to check for blockages in the fallopian tubes (tubal patency).

HyCoSy

HyCoSy is a test that shows whether both fallopian tubes are open and whether the shape of the (womb) uterine cavity is normal. The test is carried out in the Outpatient

Gynaecology department where radiographic contrast (dye) is injected into the uterine cavity through your vagina and cervix. You will be provided with a separate information leaflet which contains more detailed information if you require this examination.

Laparoscopy and Dye Test (Female)

This is performed under a general anaesthetic and you will need to be admitted to the hospital for the day. This procedure allows the surgeon to look inside your tummy and pelvis (the lower part of your abdomen where your womb, tubes and ovaries are placed) to identify if there are any problems that are preventing you from getting pregnant. The doctor injects some dye up the cervix (the first part of the womb that lies deep in the vagina) and into the womb. The doctor can see if the dye flows along the fallopian tubes and around the ovaries. You will be provided with a separate information leaflet which contains more detailed information if you require this examination.

Once you have undergone all necessary tests you will be given a follow up appointment 10-12 weeks later to discuss your results and your future treatment and management.*

*** Please note: as previously mentioned, specific criteria now apply to fertility treatment provided by the NHS. These guidelines and eligibility criteria will be discussed with you in full at the appropriate time.**

Fertility Management Procedures

If the team agrees that everything appears to be functioning normally, the option would be to refer you for IVF treatment as per NICE guidelines.

There are many local centres where you can undergo treatment for your fertility issue, whether this is NHS or privately funded. Ormskirk District General Hospital offers some first line treatments. We also have links with local units in Liverpool, Chester and Manchester for IVF.

Clomid-with TVS Monitoring and Ovulation kits

This is the first line of treatment for patients who are not ovulating(releasing an egg) or are diagnosed with Polycystic Ovarian Syndrome.

You will be required to take the prescribed tablet on day 2 to day 6 of your menstrual cycle in order to stimulate the ovaries.

On your first cycle of Clomid you will need to telephone the clinic answerphone on day 2 of your cycle to arrange a scan on day 10/11/12 if you have a 28 day cycle **or** day 13/14/15 if you have a longer cycle. The scan will help to monitor your response and identify the day of ovulation for timed intercourse.

For the remaining cycles of Clomid you will be advised to purchase Ovulation kits to monitor when ovulation(release of an egg) has occurred. If you are unable to do this options will be discussed.

Sub-cutaneous Injections with TVS Monitoring

If you fit the criteria, you will be taught to self inject a fertility drug which will stimulate the ovaries. You will then have a trans vaginal scan (internal) from day 10, repeated as many times as necessary depending on your response.

Staff will advise you of the days that you would probably ovulate and when it is most appropriate to have intercourse.

Transvaginal Scan Clinics

These scans are carried out to:

- Monitor your response to treatments
- Early pregnancy monitoring

Other Treatments Available At The Ormskirk Unit

There are a number of other techniques available if problems have been detected within the fallopian tubes, ovaries or womb. These include:

- Laparoscopic tubal surgery
- Laparoscopic ablation of endometriosis
- Laparoscopic ovarian drilling
- Outpatient hysteroscopy

You will be advised of the findings of previous examinations/ tests and these procedures will be explained in full by the doctor. A separate information leaflet is available for all the above procedures if required.

Note: reversal of laparoscopic sterilisation is not currently a procedure that is funded through the NHS.

Please remember that support and advice is always available from all members of the team and also the ward staff.

Points of Contact -

E ward at Ormskirk 01695-656901

Fertility unit at Ormskirk- 01695-656256 (Answerphone – please leave a message and your contact details at anytime. Someone will return your call within the next few days).

Fertility Clinic- Mon 09:00 - 13:00

Gynaecology Secretary- 01695 656958

(Carol Beck secretary to Miss Lucy Coyne Fertility Lead Consultant)

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During your contact with us, it is important that you are happy with your care and treatment. Please speak to a member of staff and/or the ward/department Sister/Charge Nurse if you have any questions or concerns.

MATRON

A Matron is also available during the hours of 9.00 to 5.00 pm Monday to Friday. During these periods, ward/department staff can contact Matron to arrange to meet with you. Out of hours, a Senior Nurse can be contacted via the ward/department to deal with any concerns you may have.

INFECTION CONTROL REQUEST

Preventing infections is a crucial part of our patients' care. To ensure that our standards remain high our staff have regular infection prevention and control training and their practice is monitored in the workplace. We ask patients and visitors to assist us in preventing infections by cleaning their hands at regular intervals.

As a patient there may be times that you are unsure whether a staff member has cleaned their hands; if in doubt please ask the staff member and they will be only too happy to put your mind at ease by cleaning their hands so that you can see them.

SPECIAL INSTRUCTION

ANY CONDITION SPECIFIC DANGER SIGNALS TO LOOK OUT FOR:

CONTACT INFORMATION IF YOU ARE WORRIED ABOUT YOUR CONDITION

Your own GP –

OTHER USEFUL TELEPHONE NUMBERS/CONTACTS:

NHS 111

Stop Smoking Helpline (Sefton) - 0300 100 1000

Stop Smoking Helpline (West Lancashire) - 0800 328 6297

**Please call 01704 704714 if you need
this leaflet in an alternative format**

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Southport & Formby District General Hospital
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FOR APPOINTMENTS

Telephone (01695) 656680
Email soh-tr.appointments@nhs.net

Please remember to complete the **attached** *Friends and Family Test*.

Alternatively, you can complete the *Friends and Family Test* on-line by going to:
southportandormskirk.nhs.uk/FFT
Thank you

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