

Ovulation Induction/Intrauterine Insemination (IUI)

What to expect

This handout is for patients at Center for Reproductive Health and Fertility (CRHF). It explains how a fertility treatment called “ovulation induction/intrauterine insemination” works.



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Who is this treatment for?

This treatment increases the chance of pregnancy:

- For patients who do not ovulate on their own
- For patients who have a low number of eggs
- For patients who have mildly low sperm counts or *motility* (sperm movement)
- When the cause of infertility is unknown
- For patients who use donor sperm

Treatment Steps

Possible steps of treatment include the following:

- **Clomiphene citrate (Clomid)** and **letrozole (Femara)** are oral medicines that help eggs grow and get ready for *ovulation*. Ovulation is when a mature egg is released from the ovarian *follicle* (egg sac). You will take one of these medicines for at least 5 days.
- You will check for ovulation with either a pelvic ultrasound in the middle part of the cycle, or with ovulation predictor kits (OPKs). This helps find the best time for insemination.
- Some patients may also take an **ovulation trigger injection** (human chorionic gonadotropin/hCG) to help time the insemination.
- When using an OPK, you will not need an ultrasound or ovulation trigger injection. You will check an OPK at the same time each day. Most patients begin checking OPKs on the 10th day of their menstrual cycle.
 - We recommend that you test the 2nd time you urinate (pee), before noon.
 - When you get your first positive OPK result, you must call CRHF before noon in order to have an insemination the next day.



Ovulation predictor kits can help you determine the right time for insemination.

The IUI Procedure

Intrauterine insemination places the most *motile* (moving) sperm as close as possible to the egg(s) when fertilization is most likely. This helps increase the chance of pregnancy.

The IUI procedure is relatively simple. It only takes a few minutes once the semen (sperm) sample is ready. The semen sample will be *washed*, which separates the healthy sperm from other fluids. This helps increase the chance of pregnancy.

- You will lie on an examining table
- Your provider will gently insert a speculum into your vagina so they can see your cervix.
- They will insert a thin, flexible catheter (tube) through your cervix and into your uterus. The washed semen sample is slowly injected.
- Usually this procedure is painless, but some patients have mild cramps. You may experience spotting (light bleeding) for 1-2 days after the IUI.

What are the possible risks from this treatment?

There are some risks when taking ovulation induction medicines, including:

- **Having twins:** 5-8% of pregnancies conceived using clomiphene citrate will be twin pregnancies. 3-5% of pregnancies conceived using Letrozole will be twin pregnancies.
- **Having 3 or more babies:** Less than 1% of patients (fewer than 1 out of 100 patients) who get pregnant using these medicines have 3 or more babies at the same time.
- **Cycle cancellation:** If too many mature follicles develop, or if your body does not respond to the induction medicine, the treatment cycle will be cancelled.
- **Ovarian hyperstimulation syndrome (OHSS):** OHSS happens when the ovaries get too large. It can cause symptoms like fluid retention (extra fluid in your body), nausea, constipation, decreased urination and abdominal discomfort.

Less than 1% of patients (fewer than 1 out of 100 patients) who take ovulation induction medicines get OHSS. Rarely, a patient must be admitted to the hospital.

You and your care team will decide together if the possible benefit of this fertility treatment is worth the risks.

What are the medication side effects?

- **Clomiphene citrate (Clomid):** Hot flashes, bloating, headaches, and changes in vision. If you see spots or have other changes in your vision, stop taking Clomid and call CRHF.
- **Letrozole (Femara):** Hot flashes, dizziness, headaches, mild fluid retention, nausea, changes in bowel habits, and fatigue. Joint and muscle pain are rare, but may occur. Using letrozole for ovulation induction is called “off-label use.” This means the drug was not originally approved for this purpose, but it is legal to prescribe it for this use.

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

Center for Reproductive Health and Fertility:

Weekdays 8 am – 5 pm:
Call 206.598.4225

After hours, weekends, and holidays: Call 206.598.6190 and ask to page the CRHF provider on call.