

Artificial Insemination - Intra-Uterine Insemination (IUI)

Initial Consultation with City Fertility Centre Specialist



- Diagnosis testing
- Diagnosis
- Treatment plan

IUI Treatment Options:

1. Natural Cycle Insemination

This option does not involve any medication and follows the woman's natural menstrual cycle.

2. Clomiphene Citrate Ovulation Induction

This option involves the use of medication to stimulate the ovaries and cause or regulate ovulation.

3. FSH Ovulation Induction

This option involves the use of hormone injections to stimulate the ovaries and cause or regulate ovulation.

Ovarian Stimulation

▼ A) Stimulation

The ovaries are stimulated with medication to promote the growth of follicles containing the eggs.



▼ B) Control

The response of the ovaries is monitored with ultrasounds and/or blood tests, to control the size and quantity of follicles.



▼ C) Egg Release

To assist with the final maturation of the egg and loosening of the egg from the follicle wall, an injection of Human Chorionic Gonadotrophin (hCG) - the trigger - may be administered.



Insemination

D) Sperm Collection



Using Partner's Sperm - Fresh Sperm

An optimal sample can be collected after abstaining for two days, but not more than five days.

Sperm sample is analysed and processed to concentrate the motile sperm and remove debris and immotile sperm.



Donor Insemination (DI) - Frozen Sperm

Sperm sample is obtained from either a:

- Recipient-Recruited Donor (known donor)
 - Clinic-Recruited Donor (unknown donor)
- Donated semen is required for couples who are unable to achieve a pregnancy due to male infertility. This is also an option for same-sex couples and single women.



E) Sperm Selection

A concentrated washed sample of motile sperm is used for insemination.



F) Insemination

The final sperm preparation is gently inserted into the uterine cavity using a speculum and a disposable catheter to bypass the cervix.



Key Fertility Facts

- Normally about 15% of ejaculated sperm succeed in passing through the cervix. The mucous barrier that exists in the cervix reduces the number of sperm that can pass into the uterus and fallopian tubes following normal sexual intercourse. Where the male already has a reduction in sperm count and/or morphology, and/or its motility, this normal barrier reduces the yield of fertile sperm even further.
- 1 in 25 males are unable to father a biological child for numerous medical or genetic reasons.

