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INTRAUTERINE INSEMINATION (IUI)

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IUI involves inseminating a prepared semen sample into the uterus to coincide with ovulation. The procedure is usually carried out in conjunction with a course of ovarian stimulation. Ovulation would be controlled with Suprecur and ovarian stimulation would be carried out using gonadotrophons (FSH). The aim of treatment is to stimulate the ovaries to produce two or three follicles instead of the usual one.

The treatment involves a course of daily injections and regular ultrasound examinations to monitor follicular growth. This should increase the chance of sperm fertilising an egg and achieving a pregnancy.

You may be recommended treatment for IUI for a number of reasons:

1. Unexplained infertility
2. Male factor infertility
3. Donor insemination

IUI should be considered as a 'course' of 2 cycles. The decision to stop treatment sooner would depend upon how each cycle proceeds. A follow-up appointment with your consultant is available free-of-charge after two cycles, or sooner if you are advised to proceed directly to IVF. Cumulative pregnancy rates for 2 attempts of IUI at SEFC exceed the European average.

If IUI is unsuccessful, you will be advised to proceed to IVF. You would not normally be advised to have more than two attempts at IUI before proceeding to IVF. IVF provides important diagnostic information in that it clearly demonstrates whether fertilisation can be achieved between sperm and egg. It also gives insight into the egg and embryo quality.