

## IVF / IN VITRO FERTILISATION

**Definition:** When using this technique the fertilisation of the egg by the sperm is carried out artificially, in a laboratory, for instance. After stimulating ovulation through hormones (controlled ovarian hyperstimulation), the eggs are retrieved through an outpatient intervention under local anaesthetic. Once the eggs have been collected they are examined in the laboratory.

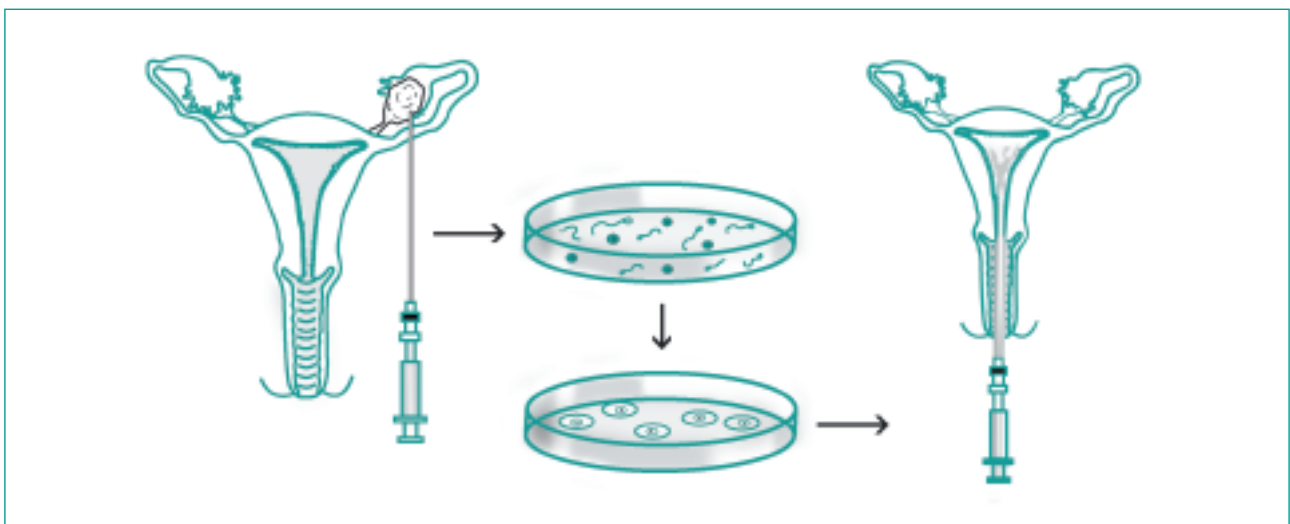
That same day, the husband or partner will deliver a sample of sperm, from which the best approximately 200,000 spermatozooids will be chosen. Next, the sperm is incubated together with the eggs in an incubator at the woman's body temperature.

About 18 hours later the eggs are examined to see how many of them have been fertilised by the sperm (embryos). Of all the embryos obtained, two or three are usually transferred to the uterine cavity, and the rest are frozen.

**Advantages:** Since we can observe the collected eggs and the sperm through a microscope, we are able to obtain more information about the infertility of the couple and we can detect any morphological abnormalities. This additional information allows us to make a more precise diagnosis about the couple's possibilities and, therefore, we are able to improve the treatment in future attempts.

Furthermore, the fact that we can freeze the surplus embryos increases the chance of pregnancy in future attempts, since only the last phases of the cycle are repeated.

**Disadvantages:** Since we do not use a general anaesthetic, the risk of complications is very small. Occasionally, the woman may respond to the hormone treatments by producing an excessive number of eggs (ovarian hyperstimulation syndrome). There is also a risk of multiple pregnancy.



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