



Patient and Family Education

Parenteral induction of ovulation (PIO)/superovulation and intrauterine insemination (IUI)/timed intercourse



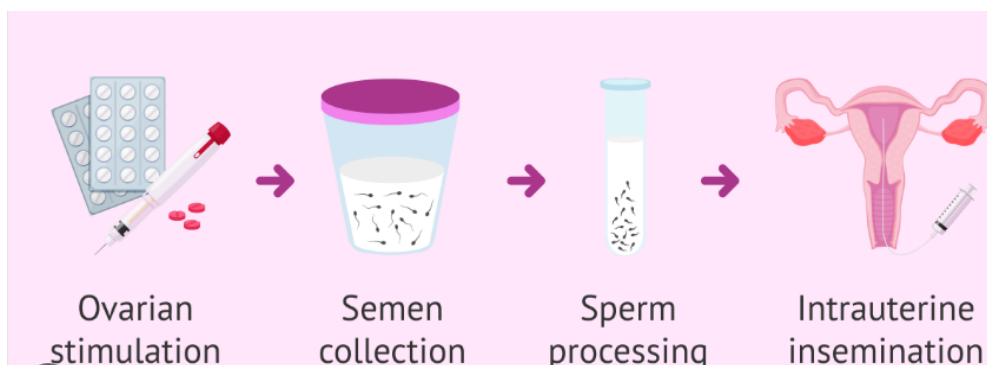
Superovulation & Intrauterine Insemination Procedure

PIO/superovulation is a procedure where hormone injections are given to stimulate one to three follicles in the ovaries until they are of an adequate size. Sperm/donated sperm is then placed inside the woman's uterus via intra-uterine insemination (IUI) or intercourse will be timed with the aim of achieving pregnancy.

Prior to initiating IUI treatment, you and your husband or the donor of the sperm will have to undergo blood tests and screening for infectious diseases. In addition, you will have to have:

- Assessment of patency of the fallopian tube and assessment of cavity of the womb. This could be performed via ultrasound, X-ray, or surgery. IUI/timed intercourse is not suitable for women in whom both fallopian tubes are blocked.
- Blood tests and ultrasound to assess your ovarian reserve to help gauge how well you will respond to the hormonal medication.

What does it involve?



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Hormone injections (and sometimes other medications) are administered to stimulate the ovaries in order to produce 1-3 follicles, thereby, increasing the chance of achieving pregnancy. A transvaginal ultrasound scan is used to monitor the growth of the follicles. A follicle is a fluid-filled structure in the ovary that contains a developing egg. The hormone, Human Chorionic Gonadotropin (hCG), is administered to stimulate the release of eggs from the follicles when the follicles are of sufficient size to synchronise the IUI/timed intercourse. This process may take 2 to 3 weeks. Afterwards, IUI or intercourse will be timed accordingly.

If you are proceeding with timed intercourse, you should have sexual intercourse the day after the hCG injection.

If you are proceeding with IUI, your husband must deliver his semen sample to the Hospital (the SingHealth institution where the Procedure is performed). The semen sample will be processed by the laboratory in order to separate the semen from the seminal fluid and select active motile sperm. A speculum is used to visualise the neck of the uterus and a catheter is then used to inject the processed sperm directly into the uterus. You may be given a course of antibiotics if you are at risk of infection.

IUI is scheduled only on working days. The development of the egg is not predictable and hence if the procedure cannot be performed during working days, you will be guided for timed intercourse.

What precautions must I take for the procedure?

Please inform your doctor if you have any medical illnesses or any of the following are applicable:

1. You have a history of allergy or reaction to any medications, drugs, or food.
2. You have a history of bleeding or clotting disorders.
3. You are taking drugs (e.g. Aspirin, Clopidogrel, Warfarin, and Rivaroxaban) or supplements (e.g. Cordyceps, Ginkgo Biloba, and Lingzhi), that thin your blood, as these substances may affect blood clotting and increase the risk of bleeding. If you are taking any of these, your doctor will advise you accordingly.

Before the procedure

Please inform your doctor if you have any medical illnesses. Before the procedure, please inform your doctor if any of the following are applicable:

- You have a history of allergy or reaction to any medications or drugs.
- You have a history of bleeding or clotting disorders.

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Please check and confirm whether all medications, including supplements you are taking for other ailments are suitable to be taken in early pregnancy.

Duration of Procedure

Approximately: 5 to 10 minutes

Precautions for procedure

If you are planning for future pregnancies, please consult your doctor before undergoing this surgery as future vaginal deliveries may contribute to recurrence of SUI.

Risks of procedure

Complications will be explained to you by your surgeon before surgery. You will be required to sign an informed consent prior to surgery.

The potential risks are:

Associated with PIO	Associated with IUI	Inherent in any pregnancy
Multiple pregnancies	Bleeding	Risks associated with older patients
Ovarian Hyperstimulation Syndrome (OHSS)	Infection	Risks of ectopic pregnancy, miscarriage and fetal abnormality
Adverse drug reaction	Uterine perforation	

Care after procedure

Refer to post gynaecological outpatient procedures Patient and Family Education sheet.

Activity / Rehabilitation

- You are advised to rest and avoid strenuous activities or prolonged standing for the rest of the day.
- Subsequently, you may resume normal activities as tolerated.

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- Avoid swimming for at least 2 weeks or until bleeding or discharges have stopped.

Nutrition / Diet

- There are no restrictions on your diet.

Safe and effective use of medication

- Take prescribed medications as instructed by pharmacist.

Special Instructions

- Some light vaginal spotting or bleeding is expected after a Gynaecological procedure. This usually decreases over time and with rest.
- Use sanitary pad to prevent staining your underwear.
- Avoid using tampons until your next menstrual period or until after bleeding and discharges stops.
- Avoid sexual activity until spotting or bleeding has stopped or as advised by the doctor.
- Do not douche after the procedure.

When and how to seek further treatment

Seek urgent medical consultation with your doctor at the O&G Centre during office hours or at the Department of Emergency Medicine of Singapore General Hospital after office hours if any one of the following conditions occurs:

- Fever of 38 °C and above.
- Excessive vaginal bleeding.
- Bleeding is bright red with blood clots.
- Severe abdominal pain.
- Foul smelling discharge from the vagina.
- Any other abnormal or prolonged symptoms, which may cause concern.

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