

Build up to IVF and our First Attempt - Mrs N.

Well where to start.....we had been trying to conceive for 2 years when our GP finally agreed to refer us to the MSG for further investigations. I was referred to have the following tests done as a day patient:-

Laparoscopy test

In a laparoscopy, carried out under general anaesthetic, a viewing tube is inserted through a small incision in the woman's abdomen. The abdomen is inflated with carbon dioxide, which makes it easier for the surgeon to check the uterus, ovaries and fallopian tubes for structural abnormalities, endometriosis and adhesions, as well as possibly repair any problems at the same time. Some surgeons also use a laparoscopy to assess whether the fallopian tubes are open: dye is injected through the cervix and should flow out of the ends of the tubes; if it doesn't, they are blocked.

A laparoscopy is usually carried out as a day procedure, but it carries the small risks and potential side effects of any operation which requires a general anaesthetic. Some women take several days to recover and can suffer soreness as the carbon dioxide tries to escape again. Despite these drawbacks, the procedure can provide a great deal of useful information, and the tiny scar will fade.

X-ray Test (hysterosalpingography)

Another standard test to assess whether the fallopian tubes are open is hysterosalpingography. Dye is injected through the woman's cervix into the uterus. This dye shows up on X-rays, so a series of X-rays is taken to check how it is flowing through the fallopian tubes and whether there are any blockages.

Any problems show up immediately, which makes this a useful procedure, but it can cause mild to severe cramps. Another advantage of this test is that you avoid having to have a general anaesthetic and

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surgery; it is usually done in the hospital's X-ray department and you can go home soon afterwards, though you may need someone to drive you.

Following the results of these tests I was advised that I had severe endometriosis which had all been lasered during the treatment. It was decided that after my next period we would start on IUI and I was booked in to be shown how to do the injections. So we started injecting Gonal F on day 2 of my next cycle and after scans every couple of days I was told my follicle looked a good size and to go home and take the trigger shot to force ovulation. The next day my husband had to take a sample up to the path lab and I had to go and collect it 5 minutes before my appointment at the MSG. The sample is then injected into the uterus using a catheter and is pretty pain free. That was the start of the first dreaded 2 week wait when you actually think that being pregnant by the end of it is actually a possibility. But it didn't work. After 4 more attempts of IUI we finally got the positive pregnancy result that we had waited for. Unfortunately I started to bleed at around 10 weeks and a scan confirmed a missed miscarriage at 8 and a half weeks, we were devastated.

So following recovery from the ERPC and some reflexology to bring my hormones back into balance we decided to give IUI 3 more attempts. None of these worked so we asked to be referred to Bourn Hall for an IVF consultation.

So, now 3 and a half years down the line, we went for our consultation and decided that we would donate eggs which would also mean that our costs were covered. Because we were donating we had to have some pretty specialised blood tests done and the usual HIV, Hep A and B, had a compulsory counselling session and then the long wait to be matched with a recipient. Because we were donating we were told we would need to spend 2 weeks in the UK for the scans and blood tests to be done at the clinic rather than at the MSG.

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We started the down regulation (where they basically put your body into the menopause) which was pretty unpleasant. I experienced hot flushes, loss of memory and of course emotional mood swings, but after about 3 weeks these died down. I had my baseline scan done at the MSG and it was confirmed that I had no ovarian activity and therefore was ready to start on the hormone injections. After about 7 days of being on these we flew across to Cambridge to start the 2 week stint. The first scan was not good, showing only a few follicles and it was decided to up my dosage of Gonal F and re scan in a few days. The next scan was still not great with only a few more follicles, this was a worry as you need a minimum of 8 eggs to be able to donate so we had to think about if we could afford to self fund if the next scan wasn't positive. We decided that we'd come this far so we would just have to stick it on the credit card. They upped my dosage to the maximum and told me to go for another scan a few days later. It was borderline but the clinic decided to go for it and I took the trigger shot at 1am the next evening. That was it, all the injecting over and done with and after 7 weeks my poor thighs needed the rest.

36 hours later off we went for egg collection. I was put under general and when I came around was a little uncomfortable with the cramping but nothing a few paracetamol and a hot water bottle couldn't sort out. We had 12 eggs, we got to keep 6 and donated 6, then the dreaded 24 hour wait to find out if any of our eggs had fertilised. The call came and it wasn't good, only 1 had despite the eggs and sperm being top quality, I was devastated and then worried that the 1 embryo wouldn't survive for transfer the next day.

We called early the following day and we were still on for transfer so off we went. The process was the same as IUI where the embryo is put into the uterus using a catheter and again not massively unpleasant. Jumped in the car and headed back to Gatwick to catch a plane home.

We were told we could get a blood test 14 days after transfer or do a home test 18 days after, so back to work I went and tried hard to keep my mind from symptom spotting. Unfortunately the progesterone pessaries made me nauseous and of course you start to think "could this be morning sickness???" But it

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wasn't to be, my tests came back negative and I was heartbroken. To go through all of that and nothing to show for it at the end.

So what do you do?? You just carry on and you try again, this time we will do ICSI and we will not donate any eggs, we need all the chances we can get. So back on the waiting list with Bourn and using the time to get your body as ready as possible for the next attempt, the first round was a learning curve so I'm hoping we'll be successful next time.

I personally feel the island needs to offer more support, it is great that they cover flight costs and we can get the drugs as prescriptions but there is no support when it doesn't work. Once you decide to go down the IVF route you have to go private, so if you are having your scans & bloods completed here this cost is not knocked off what you then pay the UK clinic, so in effect you are being double charged. The UK clinic staff are great but I found here that the medical staff forget this is one of the most stressful things, emotionally and physically, you will ever have to go through in your life. Infertility is not fun!

Surely between the islands they could have a dedicated fertility unit??