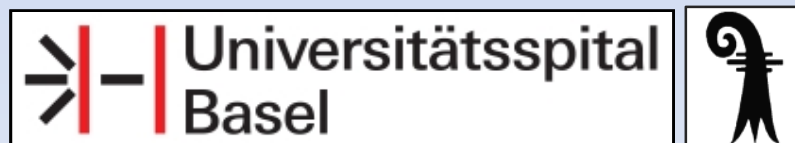


**Infertility counselling:
a specialist form of counselling
- medical treatment from a physician's perspective -**

*Ch. De Geyter
Women's Hospital
University of Basel*

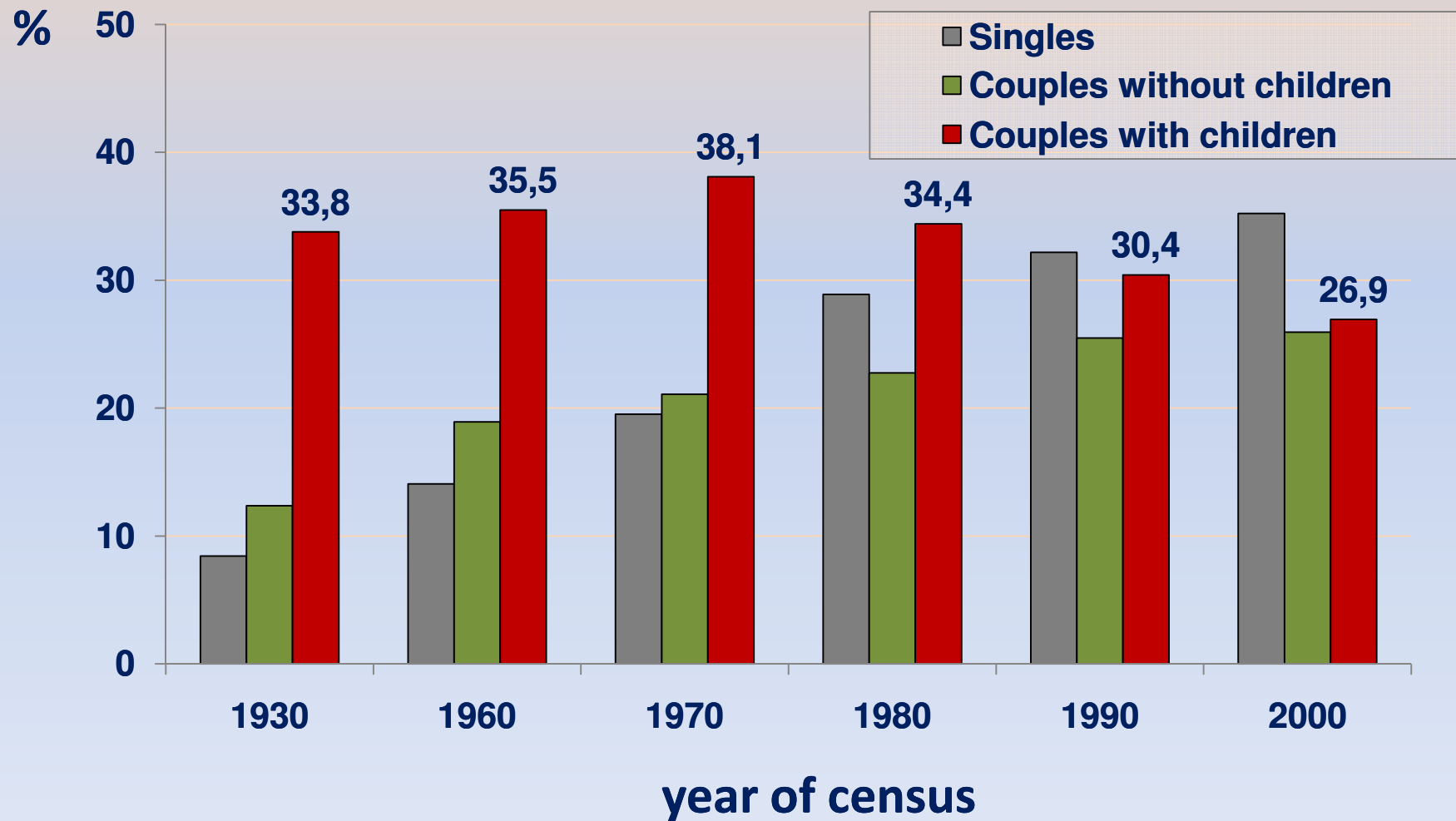




Meaning of life?

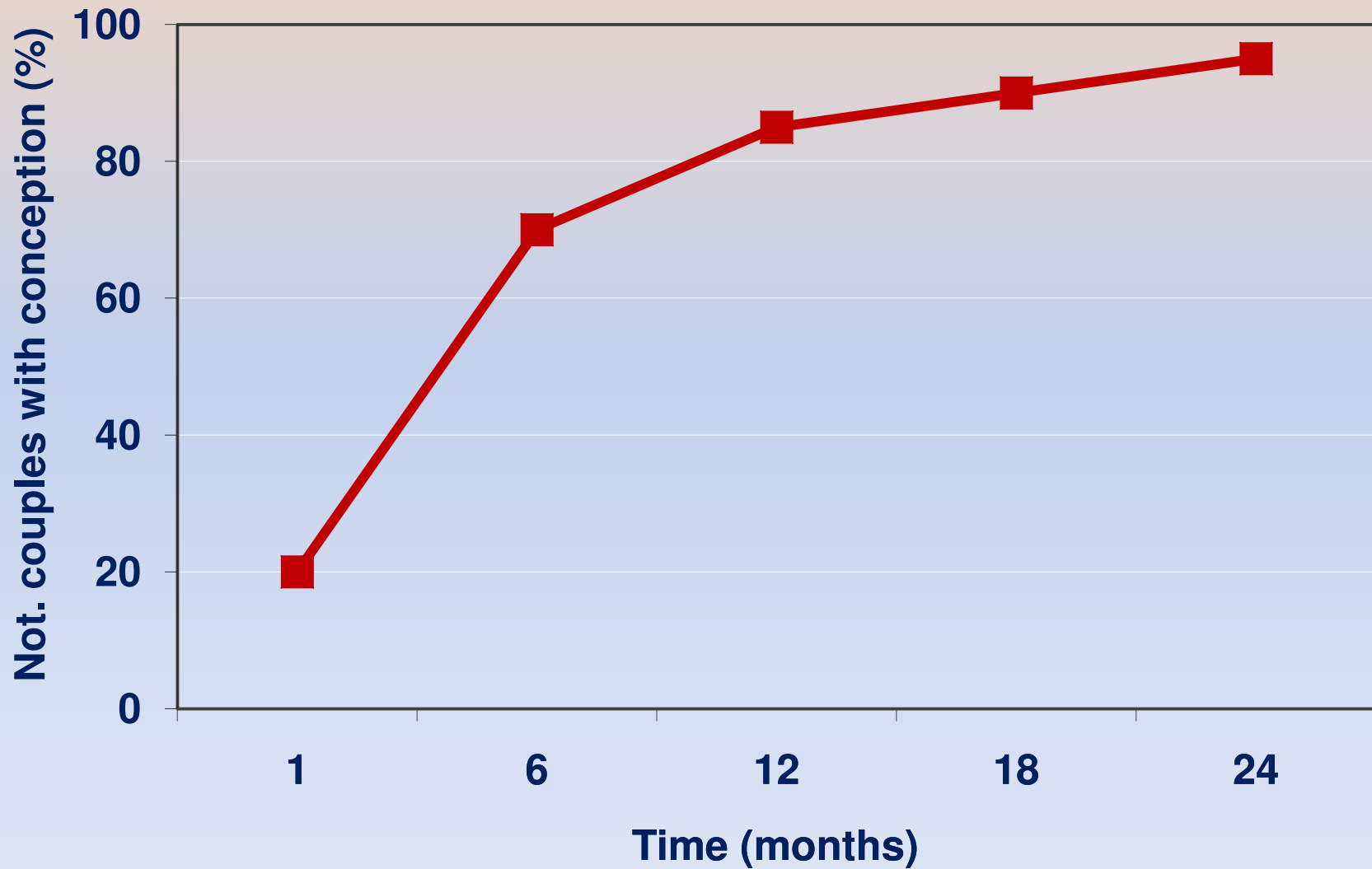
Type of households in Switzerland

- Source: Federal Office of Statistics, Switzerland -



„infertility“

= no conception within 12 months of unprotected intercourse



counselling

Diagnostics of female infertility

Diagnostics of male infertility

counselling

counselling

Combined results of couple's infertility

Possible treatments:
1. None possible
2. Treatment of causes
3. Treatment of infertility

counselling

The couple's issues:
1. Quality of partnership
2. Privacy
3. Couple's choice

The couple's decision

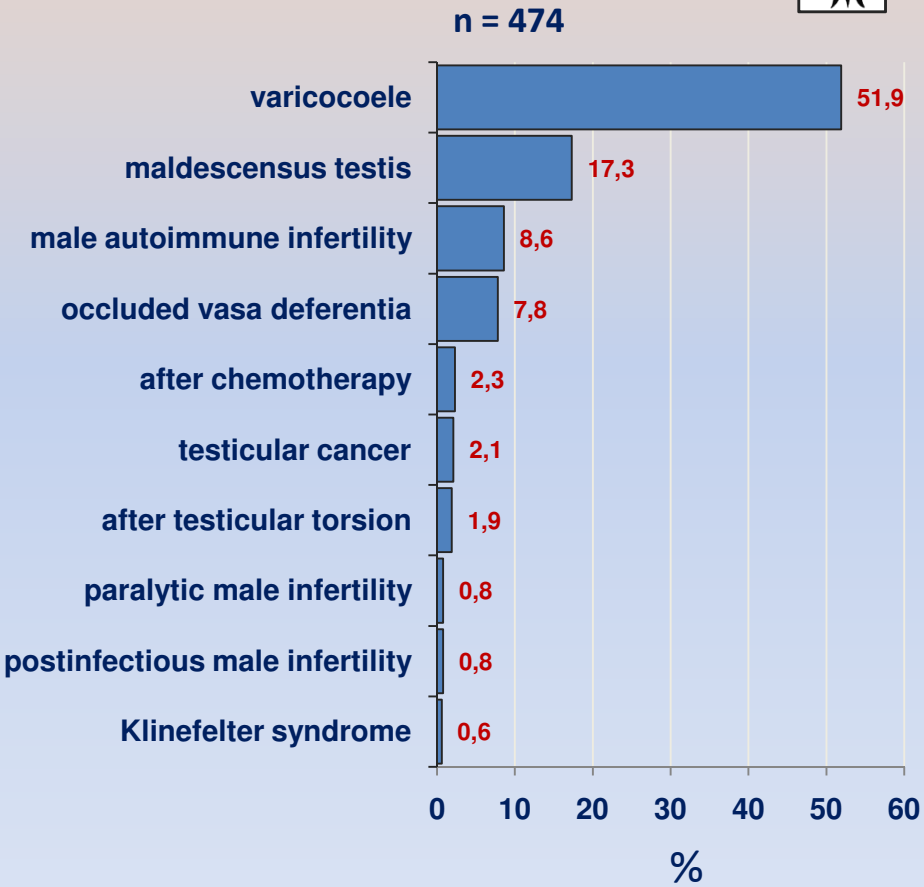
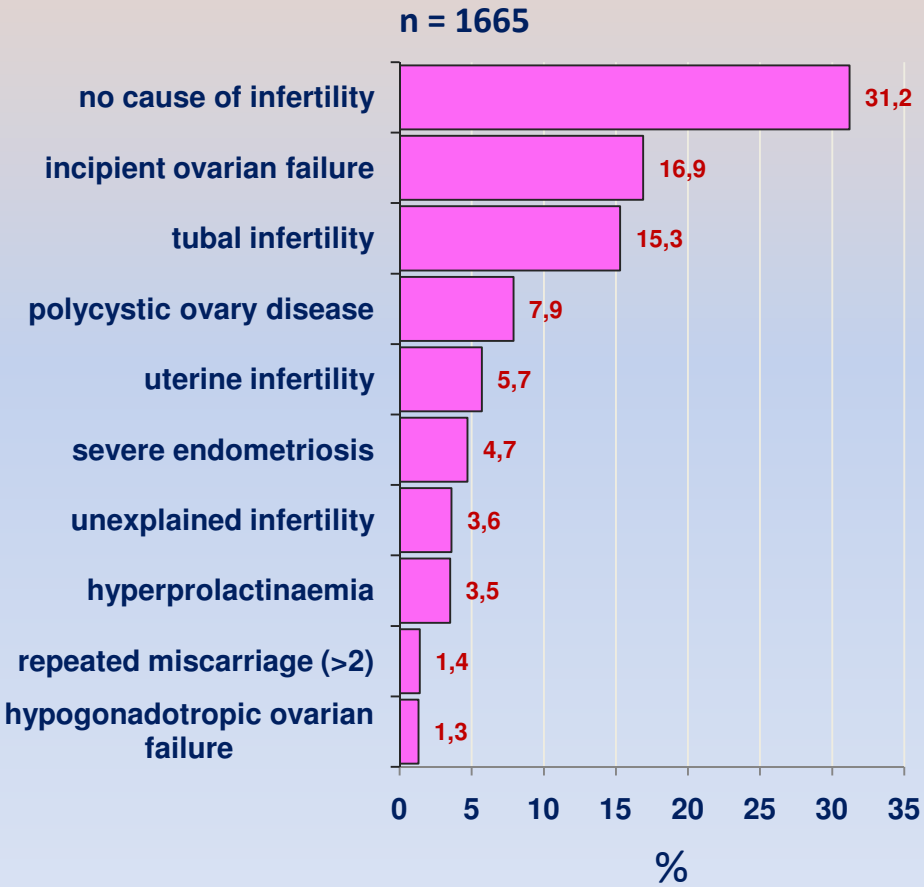
counselling

Aims of diagnostic measures in women presenting with infertility...

- 1. To identify the cause(s) of infertility**
- 2. To determine the likelihood of pregnancy**
- 3. To prepare the desired pregnancy**

Proper counselling needed

Complexity of causes of male and female infertility, as established following a standard diagnostic protocol



Treatment options of the various causes of infertility...

Treatment of female infertility

- Antibiotics
- Hysteroscopy
- Myomectomy
- Treatment of endometriosis
- Microsurgery and tubal reconstruction
- L-Thyroxin or thyreostatics
- Bromocriptin or other prolactin-lowering medication
- Pulsatile administration of GnRH
- Insulin or insulin-lowering medication including diet
- No treatment

Treatment of male infertility

- Surgical correction of varicocoele
- Cryostorage of semen
- Testicular biopsy
- Antibiotics
- Treatment with gonadotropins
- Chromosome analysis
- Semen donation
- No treatment

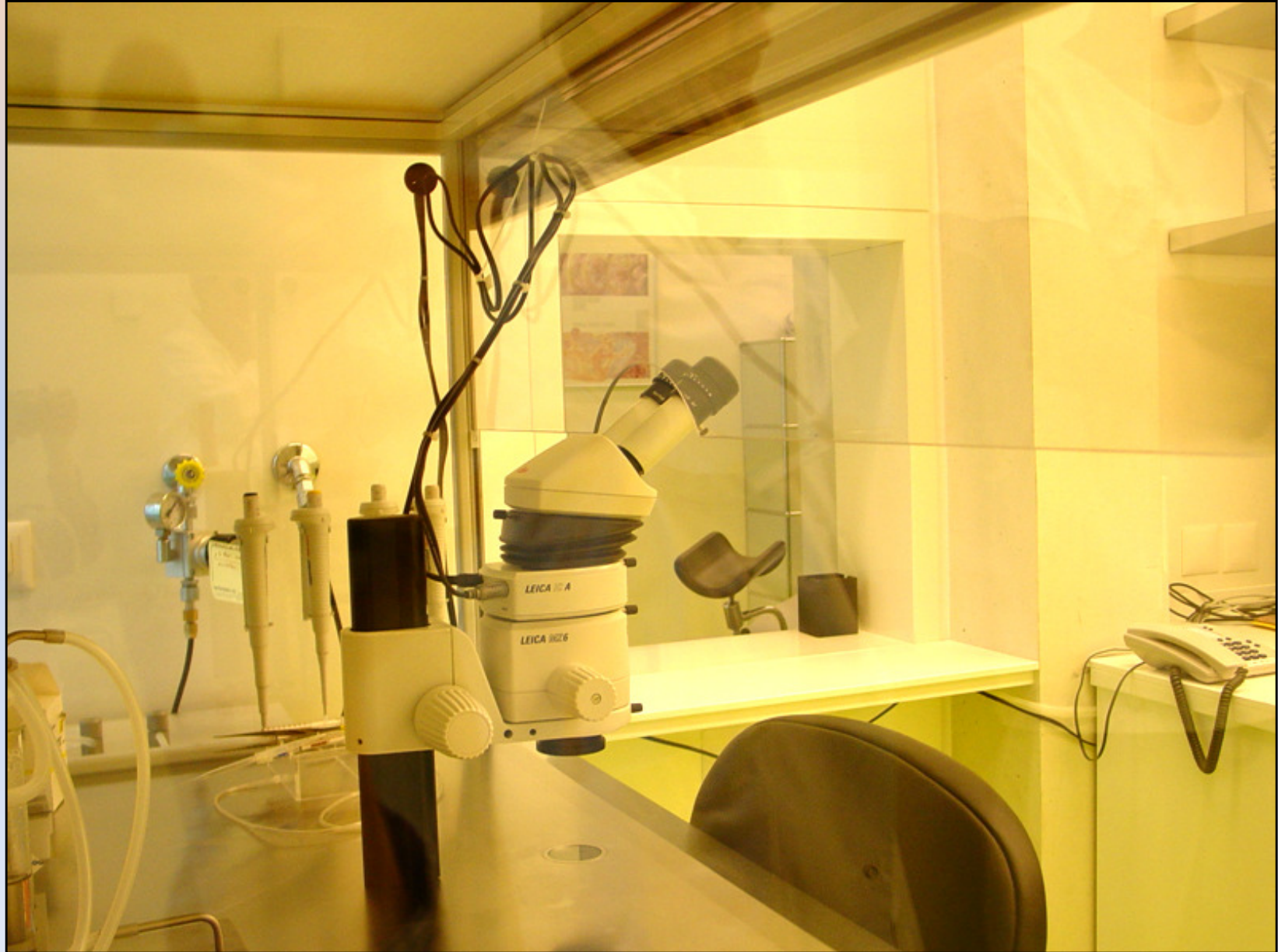
**Extensive counselling
needed**

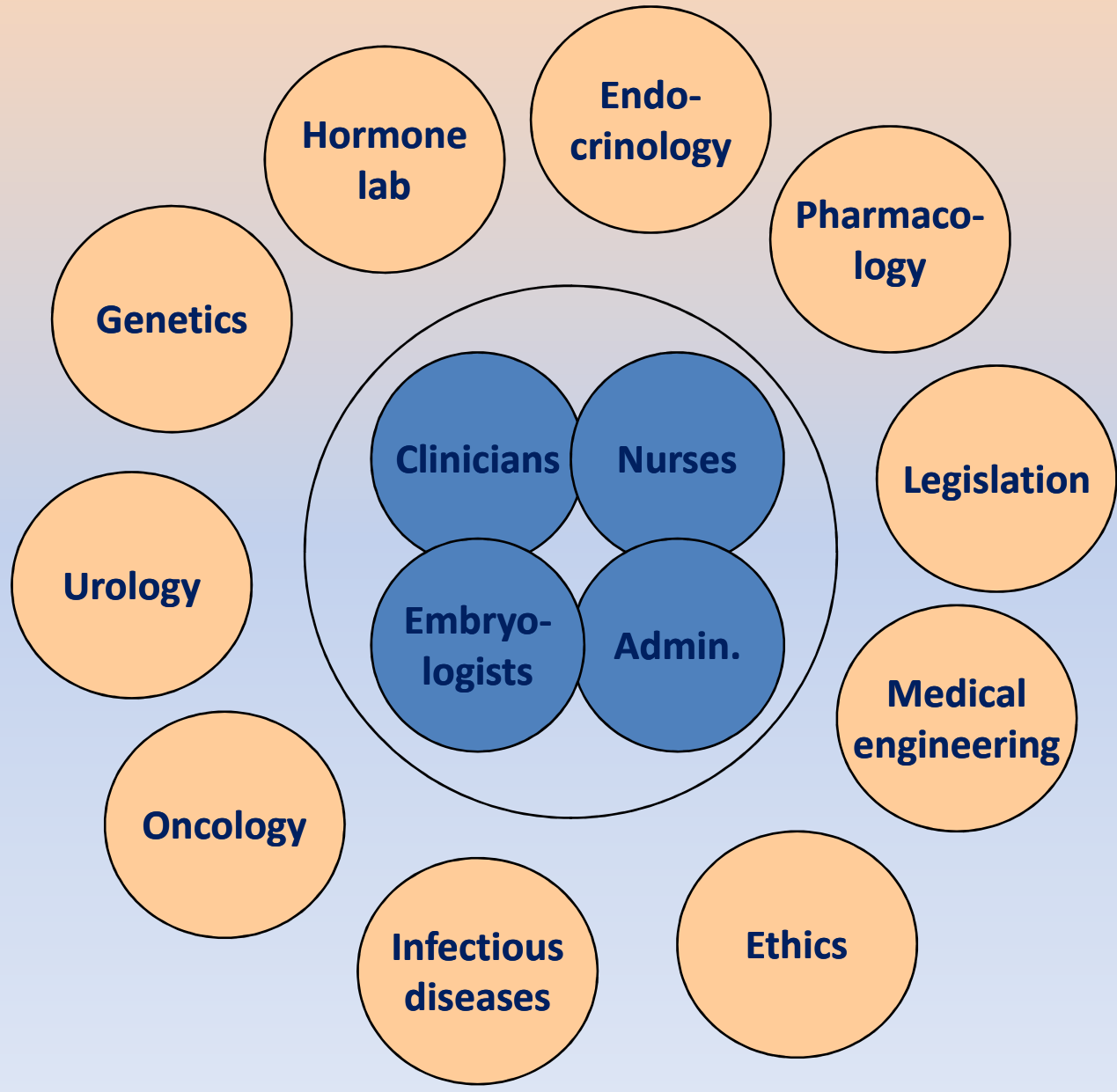


General guidelines in infertility **counselling**

- 1. Avoid excessive intrusion into the privacy of the couples**
- 2. Avoid chronification of all diagnostic and therapeutical procedures in infertility care**
- 3. Provide the couples with the choices**

Increasing complexity of present-day assisted reproduction





The physician's multitasking duties...

Patient-oriented duties

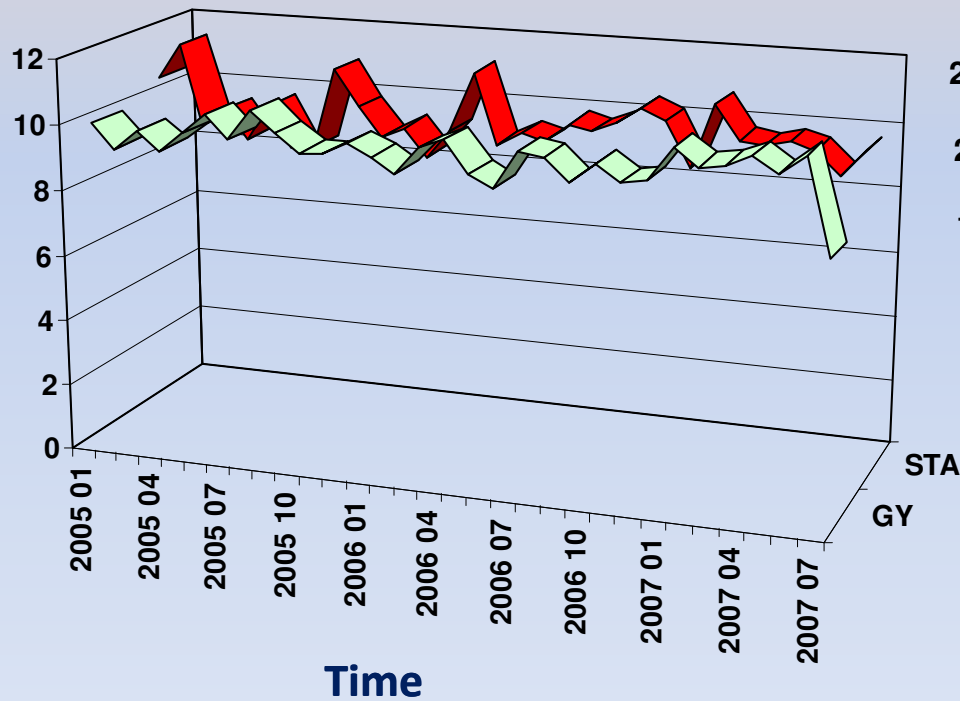
- Taking the history of the infertile couple
- Infertility diagnostics in the female partner
- Infertility diagnostics of the male partner
- Treating the cause of infertility
- Ovarian hyperstimulation
- Assisted reproduction
- Diagnosis of pregnancy
- Confirming the pregnancy
- Prenatal diagnosis
- Assessment of future child welfare

Centre-related duties

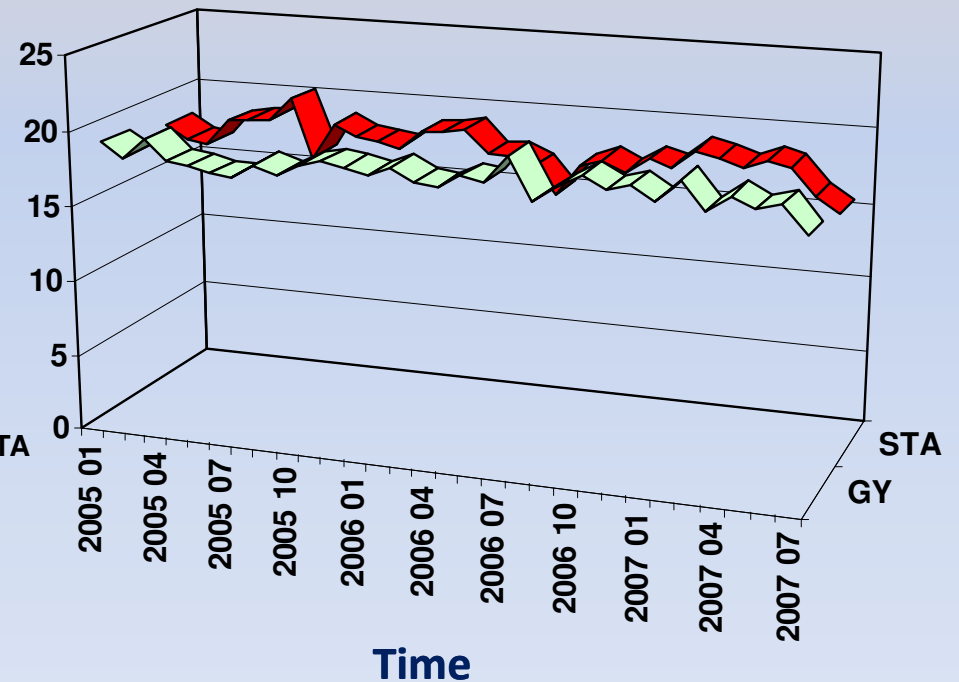
- Data management and follow-up of the pregnancies
- Quality assurance
- Multidisciplinary approach
- Teaching young colleagues
- Research and participation in multicentric prospective studies
- Networking
- Continued education
- Administration and hospital management

Quality management during reproductive sonography

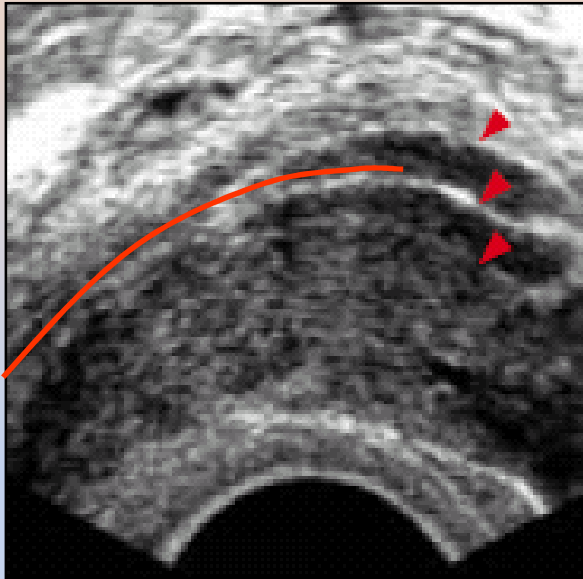
max. endometrial thickness (mm)



max. follicular diameter (mm)



Assisted Reproduction



intrauterine insemination (IUI)



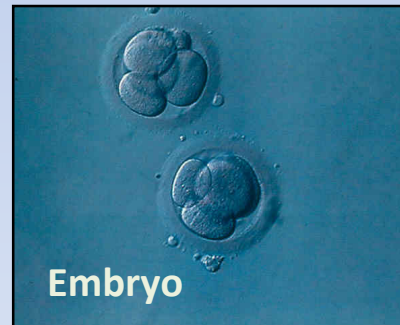
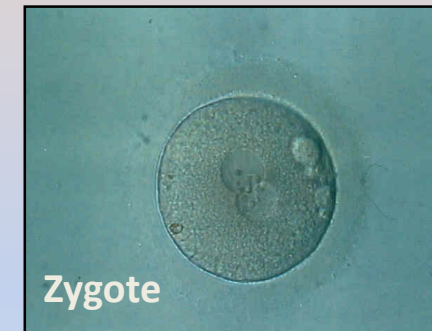
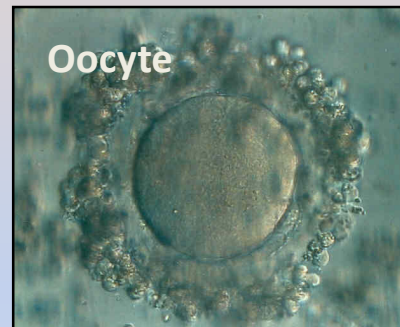
in vitro fertilization (IVF)

intracytoplasmic sperm Injection (ICSI)



Counselling prior to assisted reproduction

- ✓ Choice of the treatment
- ✓ Choice of the protocol
- ✓ Treatment outline
- ✓ Cryopreservation
- ✓ Embryotransfer
- ✓ Prognosis
- ✓ Potential risks and complications
- ✓ Side effects
- ✓ Legal aspects
- ✓ Time schedule and planning
- ✓ Pregnancy care
- ✓ Future child welfare



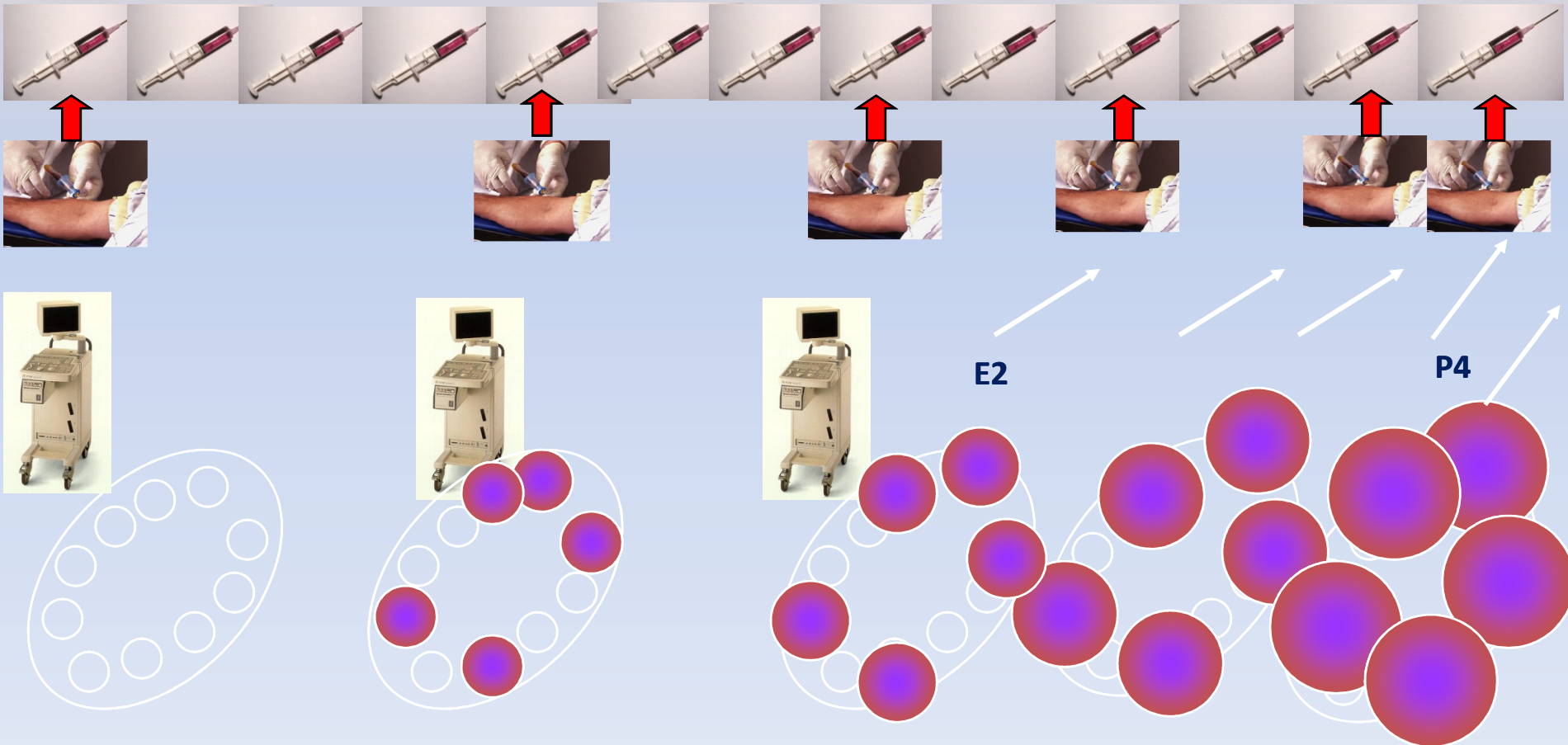
Child welfare: which criteria to be used for **counselling** prior to ART?

	Hypothetical criteria	median	variance	kurtosis
1	Avoidance of future harm to the child	1	0.43	5.44
2	Absence of mental illness in both partners	2	0.81	4.14
3	Limited paternal age for reproduction	2	1.07	-1.10
4	Future provision of education to the child	2	1.14	1.31
5	Both parents' life expectancy	2	1.54	-1.27
6	Stable relationship between both partners	2	2.36	-0.94
7	Good prognosis of normal health of the child	3	1.12	-1.09
8	Willingness to integrate socially	3	1.31	-1.45
9	Good quality of the couple's relationship	3	1.43	-1.33
10	Shared home for both partners and their child	3	1.44	-1.81
11	Sufficient social network of both parents	4	0.96	0.22
12	Adequate housing conditions	4	1.09	-0.05
13	Adequate social and financial living conditions	4	1.33	-1.37

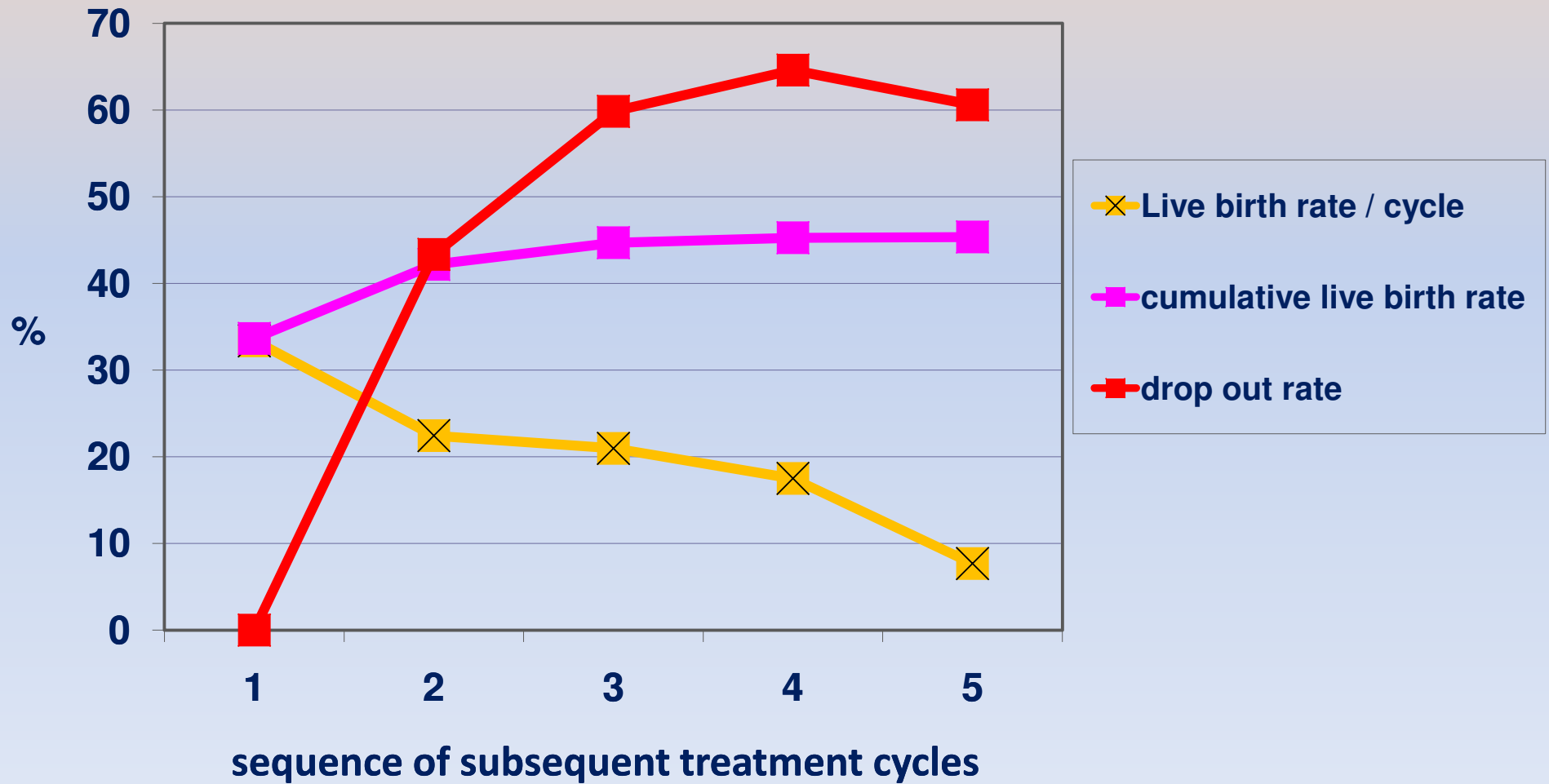
Teaching and counselling during ovarian hyperstimulation for ART

Day of the treated menstrual cycle:

1 2 3 4 5 6 7 8 9 10 11 12 13

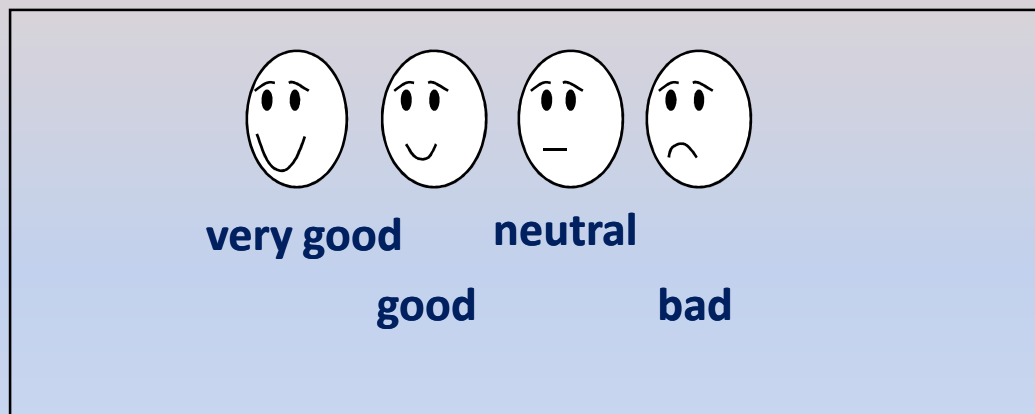


The cumulative aspect of success or failure in infertility treatment



Quality control - Questionnaires

recording the couple's perception of the activities



Discretion

Surroundings

Waiting time for first appointment

Waiting times during monitoring

Quality of nurses

Competence of the clinician

Counselling

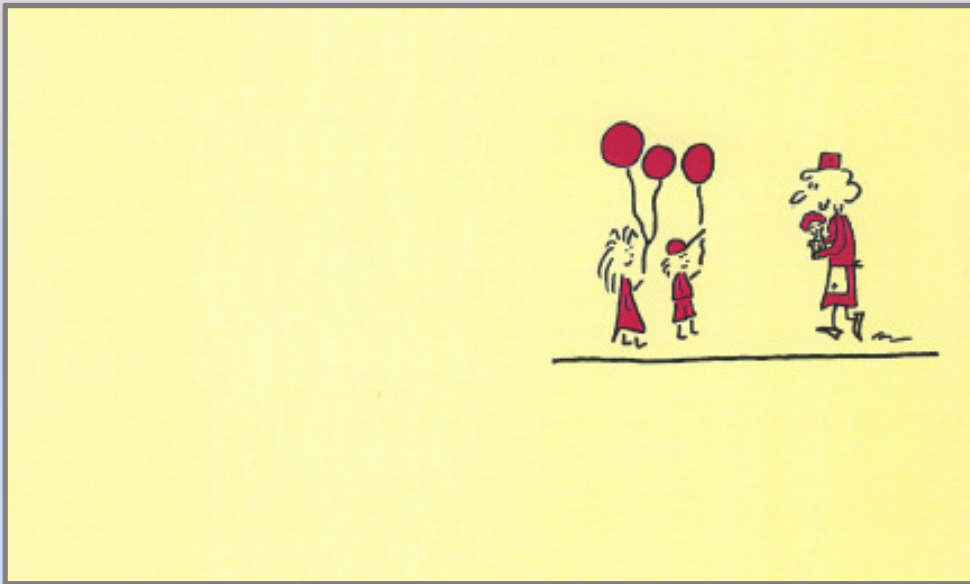
Contents of the brochure

Intelligence of the text

Anonymity

Return rates

Keep the contact...



... after delivery



... after a failed treatment

Impact of ART on society

Deliveries and multiple births
in the Canton Basel-City

