

"A future you can conceive..."

PATIENT INFORMATION BOOKLET

INTRODUCTION

To provide a wholistic approach to infertility treatment, an essential component is patient education. Understanding one's condition is an important aspect of total patient care. Certain conditions or illnesses necessitate preli-



liminary evaluation and treatment before a patient can embark on appropriate infertility treatment.

This patient information booklet aims to explain the rationale behind why sometimes you need to undergo additional tests or are referred to other specialists before you receive treatment. This will help the prevention of any untoward incidents during treatment.

Our goal in Kato Repro Biotech Center is to make your journey to parenthood safe and planned.

I wish that we will be able to help you conceive your dreams.

Rudie Frederick B. Mendiola, MD, FPOGS, FPSRM Medical Director Kato Repro Biotech Center



HYPERTENSION

High blood pressure, or hypertension, is defined as blood pressure higher than or equal to 140/90 mmHg. Women who have had pre-existing high blood pressure are at higher risk for related complications during pregnancy than those with normal blood pressure.

During pregnancy there are only few medications that are allowed for hypertension.

High blood pressure during pregnancy can increase your risk of heart disease, kidney disease, and stroke. Other possible complications include the following: fetal growth restriction, preeclampsia, preterm delivery, placental abruption or cesarean delivery.





It is best to have your blood pressure controlled by your Internist before attempting to get pregnant.

It is also best to inform us of the medications you are currently taking for hypertension so that we can change them if necessary.



DIABETES MELLITUS

Diabetes Mellitus (DM), or simply called diabetes, is a group of metabolic diseases in which there are high blood sugar levels in your system over a prolonged period of time.

If left untreated, diabetes can cause many complications.

Diabetes requires careful medical supervision throughout pregnancy. Management may include dietary changes, blood glucose monitoring, and in some cases insulin may be required.

Risks to the baby include: macrosomia (big babies) congenital heart and central nervous system abnormalities, and skeletal muscle malformations. In severe cases, perinatal death may occur, most commonly as a result of poor placental perfusion due to vascular impairment.





It is best that your sugar level is controlled before starting infertility treatment.



HYPERTHYROIDISM/HYPOTHYROIDISM

Pre-existing hyperthyroidism or hypothyroidism during pregnancy requires good control and thus needs additional medical attention.

Pregnancies complicated by uncontrolled hyperthyroidism may result in higher incidences of: miscarriage, preterm labor, low birth-weight babies, stillbirths, preeclampsia and heart failure.



Early studies found that children born to mothers with hypothyroidism during pregnancy had lower IQ and impaired psychomotor (mental and motor) development. If properly controlled (often by increasing the amount of thyroid hormone), women with hypothyroidism can have healthy, unaffected babies.



Your thyroid function should be controlled first prior to starting infertility treatment.



SEIZURE DISORDER

Seizure Disorder occurs when clusters of nerve cells in the brain, or neurons, send signals abnormally causing strange sensations, emotions, and behavior, or sometimes convulsions, muscle spasms, and loss of consciousness.





We need a clearance from your Neurologist that you are well enough to get pregnant and to take care of your baby in the future.

You might also need to sign a waiver since most of the medications that you are taking are under Pregnancy Category C^*

^{*}Pregnancy Category C Animal studies have shown an adverse effect on the fetus and there are no adequate and well controlled studies in humans, but potential benefits may warrant use of the drug in pregnant women despite potential risks.



PSYCHIATRIC/MENTAL DISEASE

If you have had in the past or currently have severe mental health problems, you are more likely to become ill during pregnancy or in the first year after giving birth than at other times in your life.

After giving birth, severe mental illness may progress more quickly and be more serious than at other times.





We need a clearance from your Psychiatrist that you are well enough to get pregnant and to take care of your baby in the future.

You might also need to sign a waiver since most of the medications that you are taking are under Pregnancy Category C^*

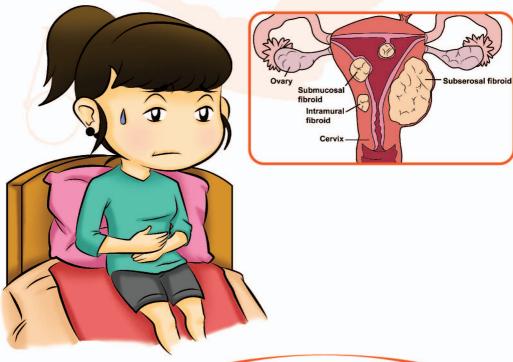
*Pregnancy Category C Animal studies have shown an adverse effect on the fetus and there are no adequate and well controlled studies in humans, but potential benefits may warrant use of the drug in pregnant women despite potential risks.



MYOMA

Myomas are non-cancerous tumors that grow within the muscle tissue of the uterus. Approximately 20-50% of women affected by myomas are of childbearing age.

Myoma during pregnancy may lead to a number of complications: Bleeding during the first trimester, Placental Displacement, Caesarian Section & Premature Labor.





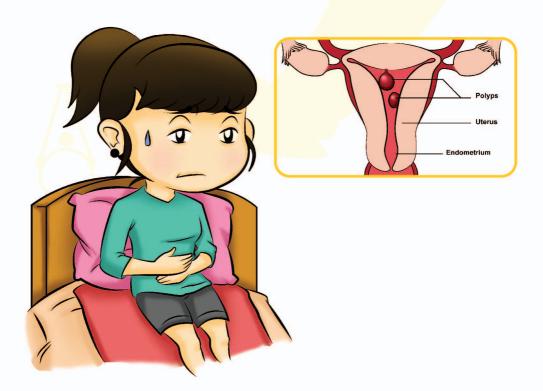
Management of myomas during infertility treatment is by case-to-case basis. Submucous myomas need to be operated prior to embryo transfer, Intramural and Subserous myomas depending on the location and size may or may not need surgery.



ENDOMETRIAL POLYP

An endometrial polyp is a non-malignant mass in the inner lining of the uterus.

No definitive cause of endometrial polyps is known, but they appear to be affected by hormone levels and grow in response to circulating estrogen.





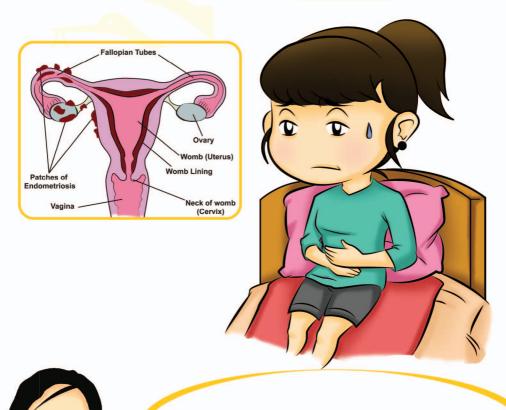
KRBC recommends removal of endometrial polyp prior to embryo transfer since this might interfere with implantation



ENDOMETRIOSIS

Endometriosis is a condition resulting from the appearance of endometrial tissue outside the uterus and causing pelvic pain. It relates strongly to infertility and has numerous ways of affecting a woman's capability to conceive.

Research shows that 15-25% of patients with infertility have endometriosis. Among these patients, 50% of them are with unexplained cause of infertility.

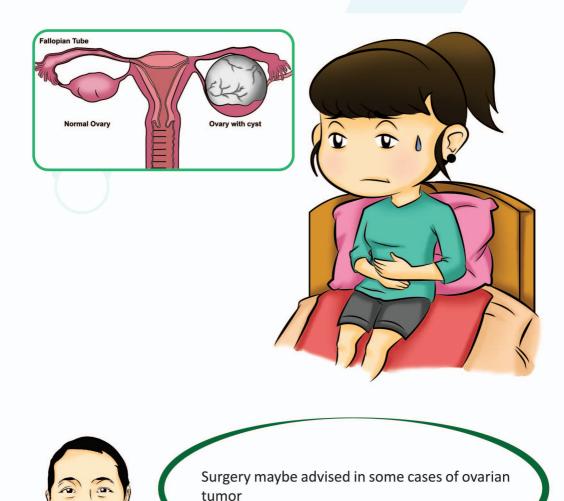


Management of Endometriosis is treated on a case-to-case basis.



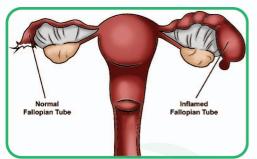
OVARIAN TUMOR

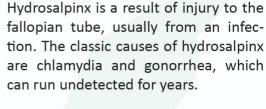
Tumors that develop in the ovaries have different types classified from benign to malignant. Patients who have an ovarian tumor should have a gynaecologist who will examine the ovarian tumor on a regular basis in parallel with the infertility treatment.





HYDROSALPINX





The use of IUDs, endometriosis, and abdominal surgery are also associated with hydrosalpinx.



Hydrosalpinx can be repaired in carefully selected cases, but pregnancy rates remain rather low. Younger women tend to have the best success rate. Women with a large hydrosalpinx and those who belong to older age group do not benefit from surgical repair.

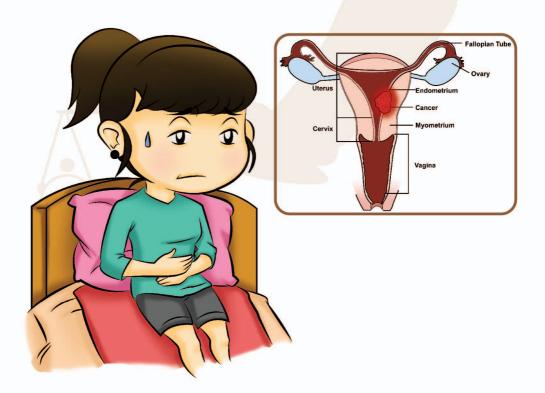


KRBC recommends patients to undergo hydrosalpinx removal by either aspiration or salpingectomy prior to embryo transfer since the fluid content of the hydrosalpinx is poisonous to the embryo.



ENDOMETRIAL CANCER

Endometrial cancer, also called cancer of the uterus or uterine cancer, is the growth of abnormal cells in the lining of the uterus.



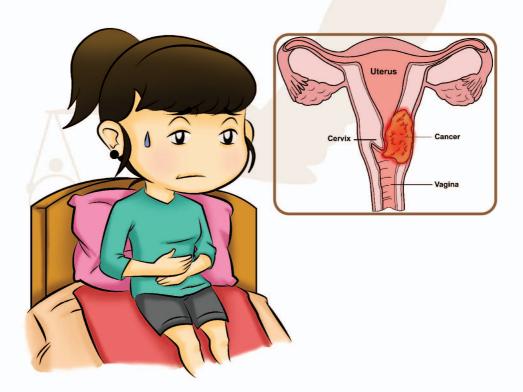


Consult with a gynecologic oncologist for the management of endometrial cancer and ask for clearance prior to proceeding with infertility treatment.



CERVICAL CANCER

Cervical cancer is the growth of cancerous cells on the cervix.





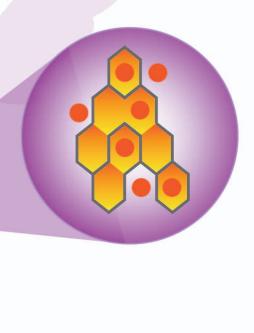
Consult with a gynecologic oncologist for the management of cervical cancer and ask for clearance prior to proceeding with infertility treatment.



BREAST CANCER

One of the causes of breast cancer is increase in female hormone levels. Undergoing IVF might increase the risk of breast cancer due to the high level of hormones given during treatment. Our clinic performs Minimal Stimulation In Vitro Fertilization, wherein the increase in hormone levels is reduced, hence, lowering the risk of having breast cancer.







We advise you to undergo breast cancer screening annually during the course of time that you are receiving IVF treatment.



HEPATITIS B

Hepatitis B is an infection of the liver. It can cause scarring of the organ, liver failure, cancer and even death if it is not treated.

Transmission is through coming into contact with blood, open sores, or other bodily fluids of someone infected with the Hepatitis B virus.



If you are pregnant and have Hepatitis B, there is a possibility of passing the virus to the baby at birth. Once the baby acquires the virus and left untreated, long-term liver problems may occur.



All newborns of infected mothers must get Hepatitis B Immune Globulin and be vaccinated for Hepatitis B at birth to decrease the possibility of transplacental transfer.



HEPATITIS C

Hepatitis C is a liver disease caused by the hepatitis C virus. The virus can cause both acute and chronic hepatitis infection, ranging in severity from a mild illness lasting a few weeks to a serious, lifelong illness.

The virus spreads through the blood or body fluids of an infected person. HCV can also be transmitted sexually and can be passed from an infected mother to her baby.



About 5 out of every 100 infants born to HCV infected women become infected at the time of birth. Unfortunately, no treatment can prevent this from happening.



If you are infected with Hepatitis C, we need a clearance from your infectious disease specialist prior to starting infertility treatment.



SYPHILIS

Syphilis is a sexually transmitted infection caused by a type of bacterium. If left untreated, syphilis can cause very serious long-term consequences. Fortunately, we can treat it with antibiotics if caught in time.

Syphilis can be transmitted to your baby through the placenta during pregnancy or by contact with a sore during birth.



An infected baby may have other abnormalities at birth such as skin rash and lesion around the mouth, genitals and anus, abnormal nasal secretions, swollen lymph glands, pneumonia and anemia. Most babies do not manifest these symptoms initially, but without treatment, they develop some symptoms within the first or second month of birth. Whether or not there are obvious symptoms early on, if the disease is not treated, babies born with syphilis may end up with more problems years later such as bone and teeth deformities, vision and hearing loss and other serious neurological problems. That is why it is critical to test and treat patients prior and during pregnancy, and for any baby who may have syphilis at birth for full evaluation and treatment.



If your test for syphilis is confirmed positive we will refer you to an Infectious Disease Specialist for treatment. Infertility treatment will only start after your Infectious Disease Doctor provides us a clearance that you are ready for the procedure and for pregnancy.

KRBC ~

HIV

The Human Immunodeficiency Virus (HIV) causes AIDS (Acquired Immune Deficiency Syndrome). This illness alters the immune system, making people extremely vulnerable to infections or diseases. This susceptibility worsens as the syndrome progresses.

Transmission of HIV is through contact with the bodily (fluids semen and vaginal fluids, blood and breastmilk) of an infected person through blood transfusion and sexual contact. In addition, infected pregnant women can pass HIV to their babies during pregnancy, during delivery of the baby at childbirth and through breastfeeding.





If your test for HIV is confirmed positive we will refer you to an Infectious Disease Specialist for treatment. Infertility treatment will only start after your Infectious Disease Doctor proves us with a clearance that you are ready for the procedure and for pregnancy.

OBESITY



Obesity is a medical condition in which excess body fat has accumulated to the extent that it may have a negative effect on health, leading to reduced life expectancy and/or increased health problems.

For most adults, having a body mass index of 25 to 29.9 is considered to be overweight, and a BMI over 30 is considered to be obese.

Being obese can harm your fertility by inhibiting normal ovulation. Obesity can also affect the outcome of in vitro fertilization (IVF). As a woman's BMI increases, so does the risk of unsuccessful IVF.

Being obese during pregnancy increases the risk of: Gestational Diabetes Mellitus, Preeclampsia and Infection, overdue pregnancy, labor problems, Cesarean section and pregnancy loss.



KRBC strongly advise overweight patients to lose weight before starting infertility treatment



RUBELLA

Rubella, also known as German measles or three-day measles, caused by the rubella virus infects the unborn child of infected women during early pregnancy. The baby might have Congenital Rubella Syndrome (cataract, hearing loss, heart structure abnormalities, etc.)





We recommend MMR vaccination for patients who do not have immunity or have low immunity to Rubella. Contraception is required for two months due to the live, attenuated rubella virus injected during vaccination.



FOLIC ACID

Folic Acid (Vitamin B9) is essential for the development of the nervous system (brain and spinal cord) of infants during pregnancy.

Oral supplement is necessary because diet alone is not enough to supply the folic acid requirement during pregnancy.





Taking 0.4mg of oral supplement daily is recommended one month before pregnancy up to the 3rd month.



SMOKING

It has been identified that smoking worsens ovarian function. Reports state that smoking hastens menopause and smokers only have 70% pregnancy capability compared to women who do not smoke.

It is also known that incidence of abortion, premature birth and abnormality of the placenta increases among smokers. It is also connected with sudden death of infants after giving birth. Some of the medications that we give are contraindicated to smokers.





We highly recommend that you stop smoking while going through Infertility treatment.

MESSAGE FROM THE GENERAL DIRECTOR

Before you get started with your infertility treatment, we first aim to give you a sense of security and an overall positive outlook of our service. We assure you that all the members of our staff will support you to the best of our abilities to achieve successful treatment and become pregnant.



The goal of infertility treatment is pregnancy. However, numerous health issues may arise during pregnancy that we should address until you give birth. It is vital to prepare even before pregnancy to overcome the problems smoothly.

This is why we made this handbook. It should help figure out whether your current health status is not a concern for the treatment and pregnancy. We suppose you can use this for self-assement prior to the infertility treatment.

Keiichi Kato
Kato Ladies Clinic Director