merrion
FERTILITY CLINIC

Egg Freezing
Oocyte Vitrification

Version 12

Reception: +353 1 556 7900

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Before Treatment

Tests Required

The following tests are required before you can proceed with egg freezing treatment. These assessments help us ensure that it is safe and appropriate for you to undergo the egg collection procedure.
The standard pre-treatment assessments include:

- Body Mass Index (BMI)
- Blood Pressure

Depending on your medical history and individual circumstances, your doctor may recommend additional investigations.

Infection Screening

- As part of the legal and safety requirements for fertility clinics, we are required to carry out an infection risk assessment and infection screening for all patients.

Infection Risk Declaration Form

- At the start of your treatment, you will be asked to complete an Infection Risk Declaration Form. This will be sent to you via email to complete electronically.
- Please answer all questions honestly and to the best of your knowledge. Your responses help us determine the most appropriate method for analysing your tests.
- If incorrect information is provided, your tests may need to be repeated, which may delay your treatment. It is therefore important that all information is accurate from the outset.
- As your treatment progresses, you will be asked to complete a subsequent Infection Risk Declaration Form. This is to ensure there have been no changes to your infection risk since your initial assessment.

Viral Screening Blood Tests

- For egg freezing cycles, screening for HIV and hepatitis is required. This is completed through a blood test.
- These tests must be carried out at Merrion Fertility Clinic and analysed by our licensed laboratory. For regulatory reasons, we cannot accept results from a GP surgery or any other clinic.
- Blood tests must be completed within 3 months of your egg collection procedure.

Chlamydia Test

- A chlamydia test is required as part of your pre-treatment screening. This must be performed using a vaginal swab, as urine test results cannot be accepted.
- This test can be completed at Merrion Fertility Clinic or through another healthcare provider.
- If you choose to have the test performed elsewhere, we can only accept results that include the necessary patient identifiers. Please note that some reports issued by sexual health clinics may be anonymised and therefore may not meet our requirements.
- If you are unsure whether your results will be acceptable, please contact the clinic before arranging testing.

Before Treatment

Treatment Consent Form

- Before treatment can begin, you will be required to review and sign a Treatment Consent Form.
- This form records your consent to ovarian stimulation, egg collection, and the cryopreservation (freezing and storage) of your eggs.
- The consent form will be made available to you through the patient portal, allowing you time to read and consider the information carefully before signing. Please ensure that you have read and understood all sections of the form before providing your consent.
- If you have any questions about the consent form or any aspect of your treatment, please contact the clinic through the patient portal. A member of our team will be happy to assist you.
- The consent form is signed electronically. Instructions on how to review and sign the form will be sent to the email address you have provided. Once the form has been signed, a copy of the completed consent will be emailed to you for your records.

Treatment Scheduling Phone Call

- Our nurses will contact you to discuss provisional dates for your treatment cycle.
- Your start date will be based on your menstrual cycle, as guided by our nursing team.
- The nurse will tell you when you need to next contact the clinic to confirm your start dates – this will usually be Day 1 of your menstrual cycle.

Look After Yourself

Merrion Fertility Clinic are here to support you through your egg freezing cycle and it is important to understand what the treatment entails.

As well as being physically demanding, treatment can also be mentally and emotionally demanding. It is important to take care of your physical and mental health during this time.

This can look different for everyone; our fertility nurses are here to support you so please reach out with any questions or concerns you may have.

Support and Counselling

Merrion Fertility Clinic does provide a counselling service. Additional support may be helpful throughout your treatment.

For further information please visit

- Merrion Fertility Clinic Counselling Services

Optimising Diet and Lifestyle

While undergoing treatment it is important to prepare your body.

- Continue to take folic acid, vitamin D and any other supplement recommended by your doctor.
- Regular exercise is recommended and avoid drinking excessive alcohol intake and smoking.
- For further information and guidance see Merrion Fertility Clinic Nutritional Advice

If you are concerned about your diet, Merrion Fertility Clinic works with a dietician. - Orla Walsh Nutrition.
Please inform our patient services team if you wish to be referred.

Before Treatment

Prescription and Pharmacy Guidance

Your treatment plan will involve taking prescribed medications under the guidance of our clinical team. The details related to fertility medications can be intricate and require the expertise of experienced pharmacists. To ensure comprehensive support for our patients, Merrion Fertility Clinic has partnered with Rockfield Pharmacy located in Dublin 16.

Rockfield Pharmacy specializes in fertility medications and has a dedicated team to assist individuals undergoing fertility treatment. This partnership aims to simplify the process for patients while also having experts advise in the distribution of these medications.

Once your prescription is ready, it will be securely transmitted to Rockfield Pharmacy through the secure Heathmail network. Upon receipt, a representative from Rockfield will contact you by phone to offer the following options:

1. **Home Delivery/Courier Service:** Choose to have your medications delivered to your residence. This service is provided free of charge and is available to residents anywhere in Ireland.
2. **In-Person Pickup:** Opt to personally collect your medications from the Rockfield Pharmacy location.
3. **Alternative Pharmacy:** Select the option to have your prescription sent via Healthmail to a pharmacy of your choosing within the Republic of Ireland.

If you decide on option one, medication delivery, please note that this arrangement is between you and the pharmacy. It's important to be aware that Merrion Fertility Clinic bears no responsibility for any delivery-related issues. We also want to emphasize the stringent data protection and confidentiality measures in place with Rockfield Pharmacy.
Your information's security is well preserved through appropriate safeguards. It's worth noting that Rockfield Pharmacy will only have access to information present on the prescription and your contact number. Access to your medical records will not be granted.

Our priority is to facilitate a smooth and secure medication acquisition process, ensuring your comfort and well-being throughout your fertility treatment journey. If you have any questions or require further clarification, please feel free to contact our team.

Rockfield Pharmacy Information

Address: Rockfield Pharmacy, Balally
Luas Stop, Dundrum, Dublin 16

Contact Number: (01) 296 7340

Opening Hours:

Monday 9 a.m.–7 p.m.
Tuesday 9 a.m.–7 p.m.
Wednesday 9 a.m.–7 p.m.
Thursday 9 a.m.–7 p.m.
Friday 9 a.m.–7 p.m.
Saturday 12p.m.–7 p.m.
Sunday Closed

Safe Disposal of Needles and Medications

- Some medications may need to be administered by injection, so it is important to manage needles safely throughout your treatment cycle.
- When dispensing your medication, the pharmacy will provide a sharps container (a small plastic bucket) for the safe storage and disposal of used needles. Please use this container for needle disposal only.
- At the end of your treatment cycle, return the full sharps container and any unused medication to a pharmacy for safe disposal.
- **Please note that Merrion Fertility Clinic cannot accept used needles, sharps containers, or medications, so we kindly ask that you do not bring these items to the clinic.**

During Treatment

Overview of Process

Preparation for Egg Collection

- Ovarian stimulation
- Monitoring follicle growth
- Preventing natural ovulation
- Trigger

Procedure

- Egg Collection Procedure

Important: Please refrain from commencing any prescribed medication until instructed by the nursing team. As your medication is tailored to your specific circumstances, we strongly advise against following guidance or instructions from alternative sources. If you have any uncertainties regarding your medications, we encourage you to seek clarification from the nursing team

Preparation for Egg Collection

Ovarian stimulation

Naturally, ovaries would usually produce one egg per cycle. For egg freezing we need the ovaries to produce multiple eggs. We achieve this through a process called ovarian stimulation.

Why?

- The more eggs that are collected, the more embryos can be created when you choose to do so.
- However, not all eggs retrieved in a cycle will fertilise (usually 50–70% do) and not all fertilised eggs will go on to form healthy embryos (about 50% do).
- Most egg freezing programmes aim to stimulate somewhere between 8 and 14 eggs during each treatment cycle.

How?

- Stimulation involves the injection of medications for 8-14 days.
- The dose is decided for each patient individually.
- Eggs cannot be seen but follicles (a follicle should have an egg) can be seen clearly on ultrasound scan.
- If you are having sexual intercourse, it is essential you use barrier protection from the outset of your stimulation.

Stimulation Timing

- The nurse will give you instructions for starting your stimulation medication.

Stimulation Medications

- As every patient's stimulation is different – please see the instructional videos that is relevant to your treatment.
- For your individual dosage requirements and timings for these drugs, please refer to the information provided to you by the nurses.
- Please note the correct storage temperature of each medication, as advised by your pharmacist.

Gonal-F	Instruction Video	**Rekovelle**	Instruction Video
Menopur	Instruction Video	**Pergoveris**	Instruction Video
Luveris.	Instruction Video		

Preparation for Egg Collection

Monitoring Follicle Growth

- Throughout the stimulation phase, the growth and number of ovarian follicles are monitored using vaginal ultrasound scans and sometimes blood tests.
- Generally, 2-5 monitoring visits are required.
- After 7-12 days of stimulation injections, the follicles will almost be mature.

Preventing Natural Ovulation

- To collect the eggs for freezing, the eggs need to remain in their follicles. Therefore, the ovaries must be prevented from ovulating.
- Stimulation causes oestrogen levels to rise, and this could induce ovulation.Therefore, a second type of hormone must be introduced to control this.
- Two treatments have been developed to prevent spontaneous ovulation: 'downregulation' and 'antagonist'.
- When undergoing OV your doctor will select the optimal strategy for you as part of your treatment plan.

Downregulation

- Medication is started 2-3 weeks before stimulation drugs and continued until just before egg collection.
- Either nasal spray or morning injection, is usually started on Day 21 of your menstrual cycle. Please see the instructional videos below for the downregulation injection if applicable to you.
- Please note the correct storage temperature of each medication, as advised by your pharmacist.
- If you are having sexual intercourse, it is essential you use protection from Day 1 of your cycle.

Buserelin Instruction Video

Preparation for Egg Collection

Antagonist

- Medication is added several days after starting hormonal stimulation and continued until just before egg collection.
- The first daily dose of your Antagonist medication (Cetrotide) will be advised by the nurse when you attend for your scan appointment. This is in injection form.
- If you are having sexual intercourse, it is essential you use protection from the outset of your stimulation.

Please see the instructional video below for the agonist injection applicable to you.

Please note the correct storage temperature of each medication, as advised by your pharmacist.

Cetrotide Instruction Video

Trigger Injection

- When some of the follicles have reached the required size, the woman is ready for the trigger injection.
- A 'trigger' injection starts the process of oocyte maturation. This is the egg's final stage of development.
- **Timing of the injection is critical.**
- Typically, the injection is given 36 hours before the procedure is scheduled.
- The specific information for this will be personalised for you, and will be provided by the nurses in advance of undergoing your treatment.
- In some circumstances, both Ovitrelle and Buserelin injections will be recommended.

Please note the correct storage temperature of each medication, as advised by your pharmacist. Please see the instructional videos below for the trigger injection specific to you.

Ovitrelle Instruction Video **Buserelin** Instruction Video

Medication Side Effects

It is common to experience minor side effects while on treatment. These may include:

- mild bruising at the site of injections
- headaches
- mood changes
- menopausal symptoms
- hot flushes (for those using downregulation) mild abdominal bloating and nausea

These side-effects are usually short-lived and are generally no cause for concern. If they are bothering you, don't hesitate to discuss any of these symptoms with your clinical team as they may be able to adjust your medication or offer other help.

Preparation for Egg Collection

Arrange Your Nominated Person

As your egg collection procedure is performed under sedation, you will not be able to leave the clinic on your own. **You must arrange for a responsible adult to collect you, accompany you home, and stay with you for the first 24 hours following your procedure.**

Once you have been given a provisional date for your procedure, we recommend making arrangements for your nominated person. This person may be your partner, a family member, or a friend.

This is an important safety requirement. If you do not have a nominated person available to support you after your procedure, we may need to postpone or cancel your treatment, as it would not be safe for you to proceed.

If you are experiencing difficulty arranging a nominated person, please contact the clinic as early as possible before your procedure so that we can discuss your options.

Please Note: For safety or clinical reasons, there may be circumstances where your egg collection procedure cannot proceed if it is considered not to be in your best interest.
Further details are provided on page 15.

Procedure

Egg Collection

Overview

- Egg collection is a minor surgical procedure.
- It involves passing a fine needle through the top of the vagina and then into the ovaries.
- This procedure is done using ultrasound. This means that the doctor can see the needle, the follicles and the ovaries at all times.
- Using gentle suction, each follicle is drained, collecting the eggs that are within.
- The fluid that is drained is monitored by an embryologist and examined under a microscope.
- The patient is sedated for this procedure.
- A Consultant Anaesthetist administers the sedation and monitors the patient throughout the procedure.
- Most patients do experience some discomfort after the egg collection procedure. The level of discomfort varies for each patient.
- It is generally advised that all patients rest and do not go to work the day of the procedure or the day after.

Patient's Preparation for Procedure Day Prior to Procedure

- This is a 'drug free day'. You should not be taking any medications on this day.
- As the egg collection is carried out under sedation, you will need to follow strict fasting guidelines before the procedure. These may vary depending on your medical history, so please follow the instructions provided to you via the patient portal.
- If you are taking any other medication, please inform the nursing team.
- The timing of this procedure is crucial and has been specifically chosen for your treatment plan.
- Please plan ahead and be organised to arrive on time for your appointment.
- You will receive a detailed, personalised set of instructions via a portal message before your procedure. Please follow only the guidance provided by our nursing team.

Day of the Procedure

- Please continue to follow fasting guidance until after the procedure.
- Please allow for spending approx. 3 hours at the clinic.
- As the eggs being collected are microscopic, great care is taken to ensure the environment they are exposed to is free from any potential contaminants. This means that it is important not to ear make up, nail polish, perfume, heavily scented deodorant, or jewellery.
- Please ensure your nominated person is available to collect you.
- The length of the procedure is typically 5-15 minutes, but can be longer in some circumstances.
- After the procedure you will be monitored by our nurses while you recover from the sedation.
- You will discuss with the clinical team regarding the number of eggs that have been collected.
- The nurses will provide you with post operative instructions such as pain relief.

Egg Collection Risks

As with any surgical procedure, there are potential risks associated with egg collection. Mild pain in the first 48–72 hours is normal and usually well controlled with simple painkillers.

- We recommend paracetamol-based drugs rather than non-steroidal anti inflammatory drugs such as ibuprofen.
- It is also better to avoid drugs containing codeine as this can cause constipation, common after egg collection.
- It is common to have a small amount of vaginal bleeding after the procedure.
- Injury to internal organs (bowel, bladder, blood vessels) from the needle used during the procedure is also extremely rare (less than 1 in 1,000).
- Rarely, there will be an adverse reaction to the drugs used for sedation and pain relief during the egg collection, approx. 0.4 per 1000

After Treatment

After Your Egg Collection

You will be contacted by an embryologist on the day following your egg collection procedure.
During this call, the embryologist will confirm the number of oocytes (eggs) that were successfully vitrified (frozen and stored).
Following your treatment cycle, you will be offered a follow-up appointment with your doctor to review the outcome of the cycle and discuss any recommendations for future treatment.

Using Frozen Eggs

Your eggs will remain in storage until you decide you are ready to use them.
Please note that Merrion Fertility Clinic has age limits for fertility treatment. Therefore, if you return to use your frozen eggs in the future, treatment must take place within the approved timeframes. These are outlined in your Treatment Consent Form.

When you are ready to pursue pregnancy, please contact the clinic to arrange a consultation. You will need a review with a doctor and may require further investigations to determine the most appropriate treatment plan. If there have been significant changes to your health since your egg freezing treatment, your doctor will discuss whether treatment is medically advisable and safe for you.

To create embryos from frozen eggs, sperm is required. Depending on your circumstances, this may be provided by a partner or through the use of donor sperm. If partner sperm is being used, your partner will undergo the necessary investigations and provide a semen sample. If donor sperm is required, the process will be facilitated by Merrion Fertility Clinic.

Frozen eggs are thawed and fertilised using a technique called Intracytoplasmic Sperm Injection (ICSI). This involves selecting a single sperm and injecting it directly into a mature egg under a microscope.

The number of eggs thawed and fertilised will depend on your individual circumstances and treatment plan. Following fertilisation, the resulting embryos are cultured in the laboratory and monitored by the embryology team. The embryo considered most suitable for transfer will be selected, and any additional viable embryos may be frozen for future use.

At the same time, you will undergo treatment to prepare your uterus for embryo transfer and support a potential pregnancy. This treatment is tailored to your individual circumstances, and your doctor will recommend the most appropriate approach for you.

Cancelled Cycles

Even though treatments and approaches are carefully tailored for individual situations and patients, unfortunately sometimes the treatment cycle does not proceed as planned. Some of the more common reasons for cycle cancellation or failure are outlined in this section.
When a treatment cycle is cancelled, your case will be discussed at the review meeting which is a multi-disciplinary meeting attended by senior members of the Clinical, Nursing and Embryology team. A revised protocol for your next treatment cycle will be decided on and, afterwards, you will be called by a member of the Nursing team to discuss dates for your next cycle.

Ovarian cysts

- Approximately 5% of patients will develop simple ovarian cysts either naturally or as a result of medication. These cysts can produce oestrogen, and may interfere with the progress of your treatment cycle.
- Cysts generally resolve either spontaneously, with the help of an oral contraceptive pill or by staying on downregulation medication for an additional week. If the cyst fails to resolve, a minor procedure may be required to drain it.
- Some cycles may need to be cancelled and rescheduled if significant cysts are found

Ovarian Hyperstimulation Syndrome (OHSS)

- Some patients, particularly those with polycystic ovaries, may over-respond to the chosen dose of stimulation and are at risk of a serious condition called OHSS or ovarian hyperstimulation syndrome.
- In OHSS, the ovaries swell and very high levels of oestrogen and other chemicals are released, affecting the integrity of the woman's small blood vessels.

In severe cases, the following may occur:

- affected women feel unwell and nauseous.
- ovarian swelling and fluid leaking from the blood vessels causes abdominal discomfort and pain.
- The kidneys may fail to work efficiently.
- Fluid can collect around the lungs and around the heart.
- The condition subsides as the ovaries return to normal size, but it will be made worse if pregnancy occurs.
- Where there is concern that OHSS may develop, it is best to give agonist trigger instead the usual hCG trigger and not to proceed with embryo transfer. Any embryos that have developed are frozen and a frozen embryo transfer is performed at a later date when the woman has recovered fully.

Cancelled Cycles

Ovarian Accessibility

Every egg collection carries a risk that one or both ovaries may not be safely accessible. Ovarian accessibility can be affected by variations in pelvic anatomy due to natural biological differences, pelvic conditions (such as fibroids, adhesions from previous surgery, endometriosis, or obesity), or ovarian response during hormonal stimulation, which may make transvaginal access difficult.

When the ovaries are difficult to access, several techniques can be used to improve accessibility. However, if the ovaries remain non-accessible, the egg collection will not proceed, as this would be unsafe. If only one ovary can be accessed, unilateral oocyte retrieval is recommended, as patients still have a reasonable chance of success.

Inadequate stimulation

Even though the dose of stimulation drugs used is specifically tailored to each person based on their age and ovarian reserve, some people respond poorly.

In approximately 5% of cycles, treatment will be cancelled prior to egg collection because of poor response, i.e. only one or two follicles develop, or a low number in someone expected to produce more.

Expert care with compassion, honesty & trust