

Pregnancy Options



I can't get pregnant - what are my options?

Many couples in Singapore have difficulty getting pregnant despite having regular unprotected intercourse. This was true for M and her husband. They had been trying to conceive for more than a year before they visited Dr Chee Jing Jye at The Obstetrics and Gynaecology Centre, a subsidiary of Singapore Medical Group.

Dr Chee is an Obstetrician and Gynaecologist with more than 13 years of experience. Her current practice includes all areas of general obstetrics and gynaecology. She sub-specialises in Maternal Fetal Medicine with expertise in areas such as First Trimester Screening for Down Syndrome and high-risk pregnancy. At 33, M had built a successful career and the couple now felt they were financially comfortable to have children. Getting pregnant was not as easy as they thought it would be. Dr Chee explained that it's becoming more common for couples to encounter fertility problems, especially

in developed countries where there is an upward trend of women delaying starting a family to pursue their careers.

The chances of becoming pregnant naturally reduce as a woman gets older because female fertility decreases with age. However, there are many options for struggling couples to consider.

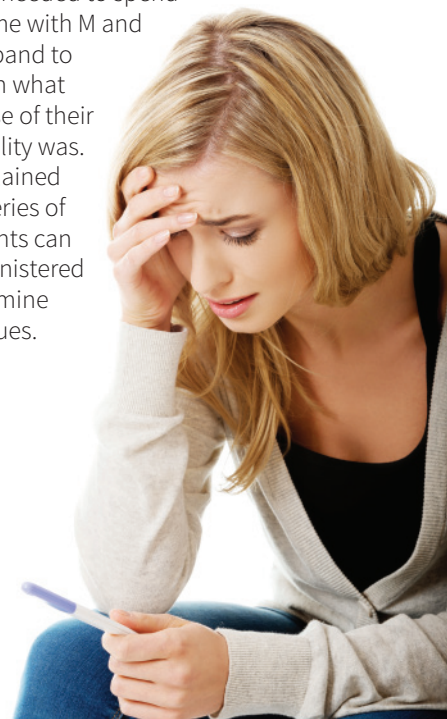
What is wrong with me?

M and her husband were worried that there might be something 'wrong,' which meant that one or both of them would not be able to conceive naturally. They had heard of various Assisted Reproductive Techniques (ART) such as in-vitro fertilisation (IVF) but did not fully understand the process.

Having seen similar cases a number of times, their gynaecologist explained that there are factors on both the male and female side which can cause difficulty in getting pregnant. The highest risk falls with the woman, around 40% of issues,

then around 20-30% due to issues with the man, and 20-30% combined factors. On the other hand, there are also around 10% of fertility issues which cannot be attributed to either side.

Dr Chee needed to spend more time with M and her husband to establish what the cause of their sub-fertility was. She explained that a series of treatments can be administered to determine such issues.



Treatment leads to success

Dr Chee reminded the couple that they had done the right thing in coming to see her. It's important to seek help and advice as soon as possible.

Starting with M, a course of oral medication was recommended to help her ovulate. Sometimes, a woman can have a condition called Anovulation where she fails to produce eggs. There is also a second escalated course of treatment which combines the oral medication with a hormone injection to stimulate egg growth. M would need to be monitored closely during this time via ultrasound. Once a specialist has identified the growth of two eggs, a further injection is given to help the eggs mature and ovulate (pass through the fallopian tubes). The couple would then be encouraged to have sex during this time.

According to the gynaecologist, this treatment can have a high success rate as long as M's partner had a good sperm count. She asked if he was a smoker. In many cases of sub-fertility, the man is a heavy smoker and drinker and these factors can have a detrimental effect on the quality of the sperm. She recommended that M's husband have a sperm test called Human Sperm Analysis (HSA). If his sperm count was low, then he would need to look at changing his lifestyle, and come in for a retest in 3 months. They could also consider a more immediate treatment for low quality sperm, called Intra-uterine insemination (IUI). The good sperm is extracted and artificially inseminated into the womb using a fine straw through the cervix to manually fertilise the egg.

The gynaecologist continued to reassure the couple; she understood their concerns and realised it was a lot to take in. She explained how each treatment is directly affected by the other. In order for IUI to be successful, they would need to make sure that M's fallopian tubes were not

blocked. This is done through a procedure called Hysterosalpingogram (HSG). A dye is instilled into the uterus, through the cervix, and an X-ray is taken. A normal HSG shows images of dye spillage through the fallopian tubes. If there is a blockage then surgery can be performed to unblock the area.

Help in getting pregnant

If the couple were still unsuccessful in getting pregnant, they could opt for In-Vitro Fertilisation (IVF). IVF is a form of assisted reproduction occurring outside the woman's body. It is a lengthy and complicated process involving several stages:



- A hormonal drug is given to the woman first of all to suppress the natural hormones she produces
- This is followed by a course of daily injections to stimulate egg growth in the ovary

- The growth is monitored closely and a third drug is injected to mature the eggs at the exact right time
- After 36 hours, specialists will then collect the eggs from the woman through a procedure called Oocyte retrieval. The eggs are fertilised with sperm from the man in a petri dish.
- Doctors will then transfer around 2-4 embryos to the woman. This process can increase the chance of conceiving twins or multiples. They will monitor closely to help the embryo form a pregnancy
- Pregnancy is normally determined after 2 weeks

At the end of the consultation, Dr Chee told the couple that it was very important that they took the time to consider all the options. Communication between M and her husband was vital now as going through these treatments can be an emotionally challenging time. They will need the support of each other and those around them. It is not an easy decision to make.

M and her husband are currently going through the treatments available to them. M says that they are taking each day as it comes and are hopeful that they will be pregnant soon.



Dr Chee Jing Jye is an Obstetrician and Gynaecologist who subspecialises in Maternal Fetal Medicine with expertise in areas such as First Trimester Screening for Down Syndrome and high-risk pregnancy. Her current practice includes general obstetrics and gynaecology, providing a wide range of obstetrical and gynaecological services for women of all ages, employing up-to-date diagnostic and therapeutic techniques.

Dr Chee is accredited by the Fetal Medicine Foundation to do Nuchal Translucency Scan for First Trimester Screening for Down Syndrome and is accredited to perform Advanced Obstetric Ultrasound Scans by KK Hospital.

Dr Chee was conferred Silver, Gold and Star, The Excellent Service Awards (EXSA), a national award that recognises individuals who have delivered outstanding service in the years 2005, 2008 and 2009 respectively. Dr Chee was also one of the few nominees for the SuperStar Award in 2009.

Dr Chee has also recently been appointed as Group Representative, Obstetrics and Gynaecology Speciality Interest Group and Chairman, Nursing and Allied Health Community at Mount Elizabeth Hospital.