


# Fertility

Factsheet by  HEART  
In Collaboration with Irene Khan  
and Dr. Roohi Jeelani



**Fertility:** the natural ability of an individual or couple to reproduce through normal sexual activity.


**Ovulation:** A part of the menstrual cycle when a ripe egg (ovum) is released from your ovary in response to a hormonal signal. The ovum moves into the fallopian tube where it is available for fertilization. If fertilized, the egg may travel to the uterus and implant to develop into a pregnancy.

**Follicle Stimulating Hormone (FSH):** the main hormone responsible for producing mature eggs. Your FSH is returned as a numerical value with an ideal range for your age. Low FSH results signal anovulation (when the ovary doesn't release a mature egg), while extremely high FSH levels can indicate the onset of menopause.

**Morula:** an early stage embryo – typically Day 3. There are 16 cells. Sometimes, depending on the patient's treatment plan, it may be recommended to transfer a “day 3” embryo – a morula – to a woman's uterus during an IVF cycle.

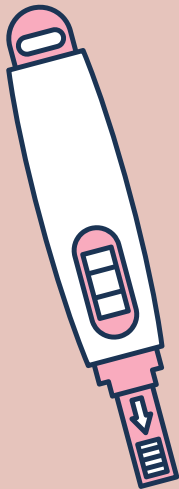
**Blastocyst:** the stage of an embryo where cells are rapidly dividing and distinction between cells that will become the baby begin to appear apart from those that will become placenta. This typically occurs around day 5 – 7 and an embryo must reach this stage in order to hatch and implant in a uterus. An embryo can be frozen at this stage. In addition, most embryos are transferred to the uterus at this stage.

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## How To Track Ovulation



### Ovulation Predictor Kit

OPKs are urine tests used to track an increase in a luteinizing hormone that indicates ovulation will occur in 12-36 hours.

### Saliva Ferning Kits

There are changes to saliva during ovulation. For this method, place a drop of saliva on the lens provided in the kit. After five minutes, check and observe if crystal like structures form. If so, ovulation will occur within 24-72 hours.

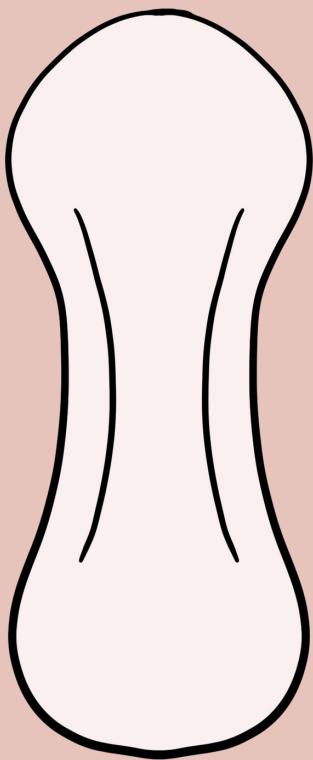


# Basal Body Temperature

Use a basal body thermometer or regular thermometer and take your temperature in the morning before you get active - it should be at the point of rest. Start charting your temperature on the first day of your period and continue to chart at the same time every morning using the same thermometer. You will notice a spike in your chart on the days after you ovulated. To increase chances of conceiving, make note of the patterns in your cycle and plan to have sex the days before your usual spike to catch the day you ovulated.



# Cervical Mucus Charting



1. **DRY:** Following the END of your menstrual cycle, you may notice that your vagina feels dry and there are no secretions released.
2. **STICKY:** The next type of secretion is dry sticky and may be white, yellow, cloudy or opaque. It may look or feel pasty.
3. **CREAMY:** Next is a creamy secretion that feels more wet. Some describe it as lotion like. It has a slippery quality to it.
4. **EGGWHITE:** The stretchy, clear and lubricative secretion is the most wet and indicates the highest fertility.

# What to Explore/Questions to Ask

It's important to ask what your medical history and other tests may indicate about your fertility. With your physician, explore how your age and lifestyle may impact your fertility and ask for a general timeline on diagnosis and treatment. If you are infertile, thoroughly explore possible treatment plans and the potential side effects associated with each plan. Make sure to find additional resources for support as infertility can be emotionally and physically challenging.

**Fertility Treatments** If you and your partner are having difficulty conceiving, fertility treatments may help increase your chances of having a baby. Fertility treatment refers to medications that stimulate egg or sperm production and procedures that involve the eggs, sperm, or embryos, but treating infertility can go beyond fertility treatments. Treatment can also include surgical interventions, lifestyle changes, weight loss, or treatment of an underlying medical condition. A treatment plan will depend on the causes behind your infertility, and your personal circumstances.

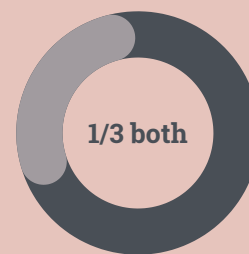
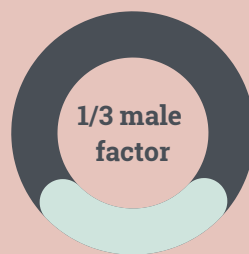
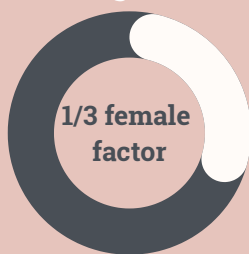
# Muslims and Infertility

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It is often assumed that Muslims with uteruses are responsible for a couple's inability to have a child, but those without uteruses are just as likely to be medically responsible for an infertility struggle. Medically, infertility is a result of many factors - 1/3 being a female factor, 1/3 male factor and 1/3 both parties. Those who identify as or are perceived as women are often blamed for the lack of fertility, which can lead to conflict with a spouse and other family members. In Muslim communities, those with fertility issues may be stigmatized and ostracized by members of their family and community. Muslims who are shamed for their infertility can likely experience psychological distress.

A lack of information and misconceptions can lead to insensitive and sometimes hurtful comments and it can be very difficult to speak to family and friends about fertility issues. Two conditions which are major causes of infertility, PCOS and endometriosis, disproportionately affect Black, Asian, and racially marginalized people with uteruses. There is little to no representation of infertility among BIPOC Muslims, which can leave these women feeling isolated and afraid.



# Fertility Treatment: Medication

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## Purpose

Regulate or stimulate ovulation, often used when ovulation disorders lead to infertility. Can also be used for women who ovulate regularly but cannot conceive by stimulating extra/better eggs

## Function

Stimulate the ovaries: increase the amount of follicle-stimulating hormone (FSH) or the luteinizing hormone (LH), Prevent premature ovulation (often used for IVF), Cause ovulation to occur (for optimal timing to inseminate), and Promote implantation on the uterine lining and increase the hormone progesterone

## Costs

Relatively inexpensive compared with other treatments- Oral medications are often paired with IUI and regular ultrasounds to total to range from \$500 and \$1000 a month for a single cycle (on its own, meds cost about \$10-\$100 month). If injecting hormones through shots (paired with IUI and ultrasounds), can cost about \$3,500 a month

## Considerations

Drugs can pose a risk of twin pregnancies and higher-order multiple pregnancies, especially with injectable medications. With drugs that induce ovulation, there is a risk for ovarian hyperstimulation syndrome (OHSS) where ovaries get swollen and painful. A few studies suggest that women taking fertility drugs for 12 months or more and who do not have a successful pregnancy might be at an increased risk of ovarian tumors later in life.

# Fertility Treatment: Surgery

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## Purpose

For structural problems that can be treated surgically to increase the chances of conception, surgery might be the best option. Surgery can be used for the removal of uterine fibroids, polyps, pelvic adhesions, and endometriosis tissue.

## Function

Laparoscopy is a minimally invasive surgery that can be useful for the diagnosis and treatment/removal of diseases and abnormalities of the abdomen and pelvis. A hysteroscopy is used to look within the uterine cavity and may be performed in conjunction with a laparoscopy. These two procedures allow for physicians to see the exterior of the fallopian tubes, but blockages or disease of the interior of the fallopian tubes (known as the tubal mucosa) must be viewed with special instruments during procedures such as a Salpingoscopy and Falloposcopy.

## Costs

The cost of surgery for fertility can range from \$2,000 to \$10,000, depending on a variety of factors:

- 1) what your insurance covers
- 2) the hospital you go to
- 3) whether the hospital and doctors are in- or out-of-network
- 4) the type of anesthesia used

## Considerations

Patients must consider whether the surgery will be minimally invasive or "open." With minimally invasive fertility surgery, you can expect less pain and recovery time than traditional 'open' surgery.

# Fertility Treatment: Assisted Reproductive Technology (ART)- IVF

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## Purpose

In Vitro Fertilization: To combine the egg and sperm outside of the body (in vitro) and then implant that embryo in the uterine lining. Medications are needed to control hormones and ovulation and minor surgical procedures are used to retrieve and implant the egg.

## Function

Medications are taken for several months to mature eggs. Then, matured eggs are removed from the body with a narrow tube and mixed with sperm to form an embryo. After 3-5 days, a physician will put 1 or more fertilized eggs or embryos into your uterus. Pregnancy occurs if those embryos implant in the lining of your uterus.

## Costs

Health insurance only covers some of the costs of IVF if patients meet certain requirements and IVF can be very costly. One cycle can cost up to \$15,000 and the national average is \$11,500.

IVF can be time-consuming, expensive, and invasive. Both partners as well as the person who is performing the procedure may suffer from depression or anxiety during the process. This is common alongside feeling overwhelmed or discouraged. IVF may take several months to complete, and oftentimes more than one round may be necessary for pregnancy. However, everybody is different and it might not work/work differently for everyone dependent on age and the cause of infertility.



# Fertility Treatment: Assisted Reproductive Technology (ART)- IUI

Factsheet by  HEART

## Purpose

IUI, also known as intrauterine insemination or artificial insemination, can be used to increase the number of sperm that reach the fallopian tubes and subsequently increase the chance of fertilization.

## Function

The most motile sperm are separated and washed of any chemicals. A physician uses a soft catheter that is moved into a woman's uterus to deposit the semen at the time of ovulation. Sperm should then swim into the fallopian tube and fertilize a waiting egg, resulting in a normal pregnancy. This can be coordinated with your normal cycle or with fertility medications.

## Costs

Depending on insurance coverage and specific fees, IUI usually costs about \$300-\$4,000 (less expensive than IVF) without insurance. The type of medication, pricing for monitoring & bloodwork, and cost of insemination (injecting sperm into the uterus) are all factors that may change the cost of IUI.

## Considerations

IUI is not recommended for women who have severe disease of the fallopian tubes, have a history of pelvic infections, or anyone who has moderate to severe endometriosis. The procedure may result in infection, spotting (small amounts of vaginal bleeding), and an increased risk of a multiple pregnancy (twins, or more which may result in early labor and low birth weight).

# Fertility Treatment: Egg Freezing

Factsheet by  HEART

## Purpose

- In the situation that an individual with ovaries gets a serious disease, such as cancer, or plans to have children at an older age, they can harvest and freeze their eggs to use later when they are ready to have children.
- The main purpose of egg freezing is to ensure there are lower chances of serious complications if they choose to have a child in the future.

## Function

The official medical name for egg freezing is mature oocyte cryopreservation. Egg freezing is a procedure that involves stimulating the ovaries with hormones to produce several eggs, retrieving the eggs, and cooling them to subzero temperatures at a lab. They can be safely thawed when you are ready to use them.

## Costs

- The average cost of egg freezing ranges from \$30,000 - \$40,000, due to the combination of treatment and storage.
- Based on the amount of cycles the person is extracting eggs, the cost of treatment, the cost of medication, and storage goes up.

## Considerations

- Consider what you expect your life timeline might be, such as an ideal age you plan to have children or making a financial plan to secure the future of your family.
- The cost of egg freezing is definitely out of range for many individuals, couples, and families, so consider income, family planning, savings, and the reality of the situation.
- People under 38-40 are usually given the option to freeze their eggs, since it is typically harder to have children past the age of 40.

# Resources for Fertility Resource Sheets

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