
FREQUENTLY ASKED QUESTIONS

Suitability of the IVF/ICSI treatment

1. Is IVF/ICSI suitable for me?

IVF is for women who have fertility difficulties such as blocked fallopian tubes or where assisted insemination (such as IUI) has not been successful. Before commencing IVF treatment, you may be required to undergo a fertility analysis in order to determine whether this treatment is right for you.

2. Is there a legal age limit for IVF/ICSI?

No, there is no legal age limit in Spain. However, after 40 years of age, the success rates are usually low.

3. How does the hormonal treatment work?

The hormonal treatment consists of a series of injections which you will need to administer for approximately 10-14 days. These injections help you to develop more follicles than you would develop in a natural cycle. By doing this, the possibility of you getting pregnant is higher than in a natural cycle.

4. What is the success rate for IVF/ICSI?

The success rate depends on your age and your fertility condition, as well as the quality of your partner's sperm. We will advise you on your success rate after considering your particular case.

5. What is the difference between IVF and ICSI? Can I choose the technique I prefer?

The difference between the two techniques relates to the way in which the oocytes are fertilised in the laboratory. With IVF, fertilisation is achieved by mixing the eggs with a selection of the best sperm. With ICSI, fertilisation is achieved by introducing a single sperm into the egg cytoplasm. The ICSI technique enables us to achieve high rates of fertilisation with low quality semen samples.

The embryologists determine which fertilisation technique is best for each individual patient.

6. Can I become a mother if I am single? And, if I am homosexual?

Yes. Spanish law permits single women to undergo fertility treatment. We have a sperm bank with sperm from a wide spectrum of donors. Homosexual women can also have these treatments; there is no discrimination in fertility treatments in Spain.

Sperm donation is completely anonymous in Spain.

7. Can we become parents if my partner is HIV positive or has another contagious illness like hepatitis??

It depends on who has the illness. Where the man has the illness, before commencing treatment, it would be necessary for the semen sample to be treated in the laboratory in order to separate the virus from the semen sample.

Where it is the woman who has the illness, it would be necessary to analyse the severity of the virus prior to commencing treatment. Depending on the result, we may or may not be able to offer you IVF treatment.

8. Are there any risks or side effects with an IVF treatment?

There are a few risks when undergoing IVF. There are the normal risks associated with having an anaesthetic, which is necessary when having egg collection. In addition, there is the risk of multiple pregnancy and also ovarian hyperstimulation syndrome. However, the treatment is fairly painless and non-aggressive.

The IVF/ICSI Process at the Manzanera Fertility Centre

9. Are there any waiting lists for this treatment?

At the Manzanera Fertility Clinic we have no waiting lists. You can contact us by phone or e-mail to arrange an appointment on a date that is convenient for you.”

10. How many visits to the clinic are required?

We recommend 2 consultations: one visit before starting the treatment and a second visit for egg collection and embryo transfer. If you are unable to visit our clinic twice, we offer the flexibility for you to attend only once, for egg collection and embryo transfer.

During your first visit to the clinic, the doctor will review your medical history with you and explain to you in detail how the treatment will work. In addition, the doctor will carry out a gynaecological examination and a test embryo transfer. The test transfer enables us to

choose the best catheter for you when you have embryo transfer. At this visit, you may have the required tests if you have not had them done before (please see the answer to question 14 for more detail).

Finally, your partner may leave a semen sample, which will then be frozen. We recommend doing this to facilitate embryo transfer (please see the answer to question 12, which provides more detail).

11. How many days do I need to stay in Spain for?

For the first consultation, you only need to stay for one day. When you are undergoing the treatment, you will need to stay for at least 10 days. However, we recommend you stay in Spain for the duration of the treatment so that you can have all of your ultrasounds at our clinic. You should also schedule in one or two days resting time after the embryo transfer.

12. Why is it recommended to freeze sperm on the first visit to the clinic?

The freezing of a semen sample is optional. However, we recommend it because if the man is unable to provide another semen sample on the day of egg collection, for unforeseen circumstances, we are still able to fertilise the eggs that have been collected with the frozen sperm. Otherwise, we would have to freeze the eggs.

13. How many days of sexual abstinence are required before the treatment?

The man should ejaculate 2 days before providing his semen sample. Note, this period of abstinence should be maintained prior to your first visit to the clinic should you wish to freeze a semen sample.

14. What tests and analysis are required prior to commencing the treatment? Can I have them done in the clinic? Can I bring them from my home country if I have already had them done?

You and your partner will need to have the following blood screening tests: Hepatitis B, HIV, syphilis and Hepatitis C. You will both also need to have your blood group tested and have a karyotype test (which is a chromosome test).

In addition, the woman will need to have a hormonal analysis and the man's semen will need to be analysed.

You can either have these tests done in the clinic or in your home country and provide us with the results. Please note, the blood screening tests and the hormone and semen analysis need to have been done no longer than 6 months prior to you starting the treatment.

15. How do I get to the clinic?

The clinic is very well connected by road, train and airports. If you wish, our chauffeur service can assist you by collecting you at your chosen airport. We can also help you find flights and local accommodation (in Logroño). If you need any help or information please contact our international department; our staff will be pleased to help you arrange your trip.

Egg collection and embryo transfer

16. How many eggs are usually collected and how many embryos will I have?

The number of oocytes obtained depends on the patient's response to the hormonal treatment. The number of embryos depends on the number of oocytes and the quality of the oocytes and the sperm (the gametes). We are unable to tell you in advance, but our **average fertilisation rate is high, about 70-75%**.

17. Are the eggs frozen before fertilisation or are they used whilst they are fresh?

The eggs are fertilized a few hours after they have been collected. We do not freeze eggs because using fresh eggs improves your success rate.

18. How many embryos are transferred?

In accordance with Spanish law, we can transfer a maximum of 3 embryos. The doctor will inform you about the quality of your embryos, the probabilities of success in your own case and advise you on the number of embryos to be transferred. The final decision however is up to you.

19. Can the remaining embryos be frozen?

Yes. When there are remaining embryos which are of good quality, we can freeze them so as to preserve them for future transfers.

20. What happens to the frozen embryos if I subsequently decide I do not want them to be transferred in the future?

You have the following options: donate the embryos to other infertile couples for embryo adoption; donate them to scientific research or continue to freeze them (this incurs an annual charge). The frozen embryos are your responsibility. Once you and your partner decide that you do not want the clinic to continue to freeze the embryos, you will need to confirm this to the clinic in writing.