

Fertility Outpatient Clinic

General Information

At some point in their lives, many people decide that they would like to have a child. This is, unfortunately, difficult for some. Around one in six couples experience fertility problems. Fertility problems are considered if you are unable to get pregnant after approximately one year of unprotected sex.

Some people with fertility problems go to their GP. The GP often refers them to the gynaecologist for further examination and possible treatment. This applies to you too. You and your partner have an appointment with the gynaecologist or fertility doctor at the Máxima MC Fertility Outpatient Clinic.

This leaflet provides more information about:

- how a pregnancy develops;
- impaired fertility;
- the most important questions in a fertility evaluation.

How does pregnancy develop?

During the menstrual cycle, an egg matures in the ovary. The egg is released about halfway through the cycle (during ovulation) and makes its way through the fallopian tube to the uterus.

During sexual intercourse, the semen containing the sperm cells ends up in the vagina. The sperm cells move through the cervix, into the uterus and fallopian tubes, on their way to the egg.

If intercourse takes place around the time of ovulation, the egg and sperm cells can meet, and fertilisation can occur. The fertilised egg can implant in the endometrium (lining of the uterus), after which the pregnancy is established.

Impaired fertility

Failure to become pregnant can have various causes. In about a third of couples, the cause lies with the woman, and in a third, with the man. In the other situations, the cause remains unclear.

The information in this brochure is general in nature and is intended to give you an idea of the care and guidance you can expect. In your own situation, other advice or procedures may apply. This brochure is therefore only an addition to the specific (verbal) information from your specialist or practitioner.

Causes of female impaired fertility

- Ovulation does not take place or only occasionally due to hormone disorders. In this case, a woman does not menstruate or has very irregular periods; this could be a reason not to wait a full year first.
- The fallopian tubes are partially or completely blocked.
- The endometrium is not thick enough or not able to sustain a foetus.
- Severe endometriosis (uterine lining growing outside the uterus).

Causes of male impaired fertility

- No or too few motile sperm cells.

Joint causes

- Sometimes, the cause can be found in both. For example, if the woman only ovulates occasionally and the man has few motile sperm cells, the chance of pregnancy is greatly decreased.

The most important questions in a fertility evaluation

The answer to these questions is important in a fertility evaluation:

- Is an egg released?
- Are there enough motile sperm cells?
- Can the sperm cells reach the egg cell?
- Are the fallopian tubes clear?

Finding a cause for your fertility problems can give you a sense of relief, especially if it is an easily treated disorder.

It can also be difficult to hear that the cause lies with you. You may feel like you aren't good enough or feel guilty towards your partner. Knowing your partner is responsible can also be hard to accept. It can also be unsatisfactory if no cause is found, as most people want to know what the problem is.

The examinations

To answer the above questions, your doctor will perform a variety of examinations. Information about these can be found in the relevant leaflets.

For the sake of clarity, we would like to inform you that your spouse/partner is also involved in the examination and any treatment process. As such, costs can be claimed from both you and your partner's health insurer. Part of these costs will fall under your excess.

Questions

If you have any questions, please contact the Máxima MC Fertility Outpatient Clinic:

- Fertility Outpatient Clinic location Veldhoven +31 40 888 95 58
(Monday to Friday 08:30 - 17:00)