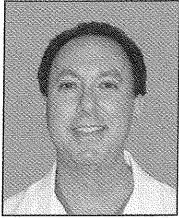


Advances in Treating Infertility Help Couples Conceive



Scott Roseff, MD, FACOG, offers a full range of infertility services, including insemination, in-vitro fertilization, the use of donor sperm and eggs, and gender selection for sex-linked genetic disorders and family balancing. His office provides highly individualized and personalized attention in a warm and caring environment. It is located on the campus of Wellington Regional Medical Center. To schedule an appointment with Dr. Roseff, please call **561-333-8232.**

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Having a baby seems like a natural part of life for many people. But conceiving doesn't come easily to all couples. In fact, about one in 10 couples of reproductive age suffer with infertility — a disease of the reproductive system that makes it difficult to get pregnant or maintain a pregnancy.

In the past, there was little doctors could do to help infertile couples. But that's not the case any longer.

"There are so many advances in diagnosing and treating infertility that the outlook for patients who want to have a child is very positive," says Scott Roseff, MD, a board-certified reproductive endocrinologist and infertility specialist on staff at Wellington Regional Medical Center.

Generally, experts say that couples may want to see an infertility specialist if they haven't become pregnant after a year of unprotected intercourse. But Dr. Roseff recommends that some couples seek help earlier. They include:

- Women who have had two or more miscarriages.
- Women over the age of 30 who have been trying to get pregnant for six months.
- Women over the age of 35 who want to become pregnant.
- Men and women considering pregnancy who have had medical conditions or injuries that may affect the reproductive system.

When couples seek help for infertility, doctors talk with both partners about their medical histories. They may also perform physical exams and specific tests to try and find out why couples are having difficulty conceiving or maintaining pregnancies. For example, doctors may perform X-ray exams with a contrast dye to evaluate the uterus and fallopian tubes. They may also recommend sperm analyses, advanced sperm testing, pelvic ultrasound, hormone testing, microscopic evaluation of the uterine lining and other tests for infertility.



Treatment

Treatment varies depending on the cause of the infertility. Some options available to infertile patients include:

- **Intrauterine insemination** — Doctors use a thin catheter to inject sperm into a woman's uterus on the day she ovulates.
- **Superovulation with insemination** — A woman takes injectable fertility drugs to increase her egg production. Then, on the day of ovulation, doctors inject her partner's sperm or donor sperm directly into her uterus.
- **In-vitro fertilization (IVF)** — A woman takes injectable fertility medications to increase her egg production. Doctors remove eggs from her ovaries and fertilize them with her partner's sperm or donor sperm in a laboratory. Finally, doctors use a catheter to transfer one or more embryos into the woman's uterus.
- **Intracytoplasmic sperm injection (ICSI)** — This procedure is very similar to IVF, except that a doctor injects a man's sperm directly into his partner's eggs to create embryos.

"The success of advanced infertility procedures is phenomenal," Dr. Roseff says. "Today, we're able to help most couples have the families they so desperately want and deserve."