

# Female Fertility 101

## Outline

Dr. Julie Lamb, is a board-certified reproductive endocrinologist and infertility specialist at Pacific NW Fertility in Seattle and serves as clinical faculty at the University of Washington. she directs the REI training of Ob/Gyn resident physicians and is the Director of the Center for Fertility Preservation at Pacific NW Fertility.

1. Understanding the menstrual cycle in a healthy woman.
  - a. What can interfere with this cycle?
2. Understanding the basic of conception.
3. Basics of Infertility
  - a. How is infertility defined?
  - b. How common is it?
  - c. What conditions would warrant an immediate infertility workup without waiting the recommended amount of time
    - i. Absence of or irregular menstrual cycle
    - ii. Known or suspected uterine, tubal, or peritoneal disease
    - iii. Stage III or stage IV endometriosis
    - iv. Known or suspected male infertility
    - v. Surgery on female reproductive tract
    - vi. Fibroids
  - d. Recurrent Pregnancy Loss-defined
4. What percentage of infertility is caused by the female partner, the male partner, or both?
5. What causes a woman to not ovulate?
  - a. PCOS
  - b. Endocrine abnormalities
  - c. Thyroid disorders
  - d. Body weight
6. Initial workup for women who meet the definition of infertility.
  - a. Essential components of an initial workup include a review of the medical history, physical examination, and additional tests. For the female partner, tests will focus on ovarian reserve, ovulatory function, and structural abnormalities.
    - i. What questions should be asked about medical history that would be relevant to the potential etiologies of infertility?
    - ii. What should be the focus in the physical exam?
    - iii. What tests are commonly used to determine ovarian reserve, ovulatory function, and structural abnormalities.
  - b. Given the prevalence of male infertility, a women's health specialist may reasonably obtain the male partner's medical history and order the semen analysis.

- c. Imaging of the female reproductive organs provides valuable information on conditions that affect fertility. Imaging modalities can detect tubal patency and pelvic pathology and assess ovarian reserve.
          - i. What imaging is usually recommended to detect tubal patency and pelvic pathology and assess ovarian reserve
- 7. Workup for Recurrent Pregnancy Loss
- 8. Treatment Options for Infertility
  - a. Natural conception rate
  - b. Understanding the basics of fertility medications
    - i. Medications
    - ii. How are they administered
    - iii. Success rates
  - c. IUI
  - d. IVF
    - i. Success rate
- 9. Treatment Options for Recurrent Pregnancy Loss
  - a. Success rates
  - b. Differences between 1<sup>st</sup> and 2<sup>nd</sup> trimester miscarriages
- 10. How does the infertility workup differ for Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, and Gender Nonconforming Individuals?