

How Can Fertility Specialists Help Same-Sex Individuals and Couples Build Families?

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See their advertisement
on the back cover



Same-sex individuals / couples seeking to build a family face additional challenges and often lack medical support and guidance. Fertility specialists, like Dr. Arlene Morales and Dr. Wendy Shelly, often see individuals / couples who have been poorly counseled (or not counseled at all) about their reproductive options. In many cases, valuable time (biological clock!) and resources have been wasted.

Home insemination may work for some women, but others may require evaluation and treatment for underlying reproductive issues. Many are not counseled on the issue of female age-related fertility and the appropriate time to seek help.

Gay men need assistance coordinating the complex process of egg donation and gestational carriage (surrogacy). Though gestational carrier agencies can coordinate some aspects of the process, it is **integral and optimal** to have physician involvement in selection and evaluation of both the donor and gestational carrier.

With appropriate and timely evaluation, a fertility specialist can diagnose underlying problems, discuss options and help you build your family.

Fertility Basics for Females

- Fertility declines slightly in the late 20s and sharply in the mid-30s. Women ≥ 35 should have an assessment of fertility prior to devoting time and resources to inseminations

- Ovulation, the release of a mature egg, must occur for a woman to conceive. If your menstrual cycles are ~26-34 days, ovulation is likely occurring around mid-cycle. A woman with cycles shorter or longer than 26-34 days may need help to induce ovulation and should be evaluated

- Fallopian tubes provide a route for sperm and egg to find each other. If a woman has a history of Chlamydia or endometriosis, her tubes may not be open; evaluation is important to determine if natural conception is possible

With appropriate and timely evaluation, a fertility specialist can diagnose underlying problems, discuss options and help you build your family.

Reproductive options with the help of a reproductive endocrinologist:

- Donor (known or anonymous) sperm insemination with your natural cycle
- Donor sperm insemination with medication to induce ovulation
- In Vitro Fertilization (IVF) – retrieval of egg combined with sperm to create embryos for transfer to uterus

- Recipient of Partner's Eggs (ROPE) – one partner provides the eggs, the other carries the pregnancy

Fertility Basics for Males

- Fertility begins to decline in the late 40's/early 50's
- Over 50, increasing incidence of autism, schizophrenia, chromosome abnormalities

Reproductive options with the help of a reproductive endocrinologist:

- Sperm from one or both partners combined with donor eggs create embryos for transfer into a gestational carrier



Drs. Morales and Shelly of Fertility Specialists Medical Group encourage reproductive education so that they will never hear, "I wish we would have met you sooner....". Please visit www.ivfspecialists.com and www.fertilityinyour30s.com for additional information.