

Reproductive

M E D I C I N E M A T T E R S

Summer 2005

ASK ABINGTON

Dear Abington Reproductive Medicine, My physician has recommended Intrauterine Insemination (IUI), and he plans to perform one IUI per cycle. From the research I've done, one IUI per cycle is fairly standard. But wouldn't two or more IUIs per cycle significantly increase my chances of conceiving—and perhaps save my husband and me some money?

**Best,
Perplexed in Pennsylvania**

Dear Perplexed,
Your question is a good one. But first, a little background for our readers. Intrauterine Insemination, or IUI, is typically performed in cases of low sperm count or motility (movement), impotence, premature ejaculation or incompatibility between a woman's cervical mucus and her partner's sperm. It may also be used in instances of unexplained or female factor infertility. The procedure involves placing the partner's sperm directly in the uterus near the time of ovulation. Before insertion, the sperm is "washed," a procedure in which the sperm is separated from the seminal fluid and carefully analyzed. (IUI can also be performed with donor sperm.)

Now, back to the issue at hand. Though it may seem counterintuitive, IUI data

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SHARED RISK IVF TREATMENT REFUND PROGRAM NOW AVAILABLE TO PATIENTS



Nobody plans to have difficulty conceiving. As a result, couples that find themselves in this situation often have limited financial resources available to devote to building their family. And since each patient's situation is different, the cost of pursuing In Vitro Fertilization (IVF) can be hard to predict; while some patients may conceive during their first cycle, others may require three or more cycles. Plus, while we pride ourselves on exceptional success rates, no fertility center can guarantee a specific outcome.

To lessen the financial burden and anxiety many patients feel when faced with the high costs of IVF technologies, Abington Reproductive Medicine will now offer a Shared Risk IVF Treatment Refund Program through IntegraMed, a highly respected infertility treatment network. We researched this matter extensively and found that the IntegraMed Shared Risk Program is the most generous available.

Here's how it works: Patients who qualify for this program pay a fixed, discounted fee that includes three IVF cycles and three frozen embryo transfers. For women under 35, the fee is typically the cost of two cycles. The fee is slightly higher for women between the ages of 35 and 37, and for those who undergo IVF in conjunction with another treatment, such as IntraCytoplasmic Sperm Injection (ICSI). When a patient takes a baby home from the hospital, IntegraMed retains the full fee. If treatment is unsuccessful, the patient receives a 70 percent refund. The program is called "Shared Risk" because patients are essentially "sharing" the financial burden of IVF with IntegraMed.

While Abington Reproductive Medicine urges patients without insurance coverage for infertility treatments to consider this program, we will not try to persuade our patients to participate. Our practice does not benefit in any way from patients who enroll in the program, and in most cases, our physicians will not even be aware of a patient's participation. Enrollment in the program will have no effect on medical care, and IntegraMed will not be involved in your treatment plan.

Abington Reproductive Medicine urges patients considering Shared Risk to carefully review the program's advantages and specifics compared to traditional, pay-per-cycle payment. Participants should also be aware of items not covered under the program, such as fertility medications. Low-interest financing is available.

For more information or to find out if you qualify, call 1-866-968-7483. ♦



ABINGTON REPRODUCTIVE MEDICINE ADDS FOURTH PHYSICIAN: MINOOS HOSSEINZADEH, M.D.

Please join Abington Reproductive Medicine in welcoming Dr. Hosseinzadeh, our new board-certified reproductive endocrinologist. Previously of the Fertility Center of New England in Boston, Dr. Hosseinzadeh brings special expertise in infertility, in vitro fertilization, and advanced laparoscopy and hysteroscopic surgery to our practice.

"The physicians of Abington Reproductive Medicine are among the best in the country, and to be asked to join their team is a great honor," says Dr. Hosseinzadeh. "At the same time, I think the practice and its patients will benefit from the added perspective of a female physician."

Fluent in English, French and Farsi, Dr. Hosseinzadeh attended medical school at Laval University in Quebec. Following her residency training in obstetrics and gynecology at Ottawa University and an internship at McGill University in Montreal, she completed a fellowship in reproductive endocrinology and infertility at the University of Cincinnati. A highly respected author and researcher, Dr. Hosseinzadeh has co-written articles for the journals of the

International Correspondence Society of OB-GYN and the Society of OB-GYN Canada on hormone replacement therapy and age-related female infertility, respectively. She has also co-presented at many national meetings—most recently at the 2003 annual gathering of the American Society for Reproductive Medicine.

"Bringing a physician in with Dr. Hosseinzadeh's particular expertise will be a huge bonus for the practice," says Jay Schinfeld, M.D. "She will complement our existing strengths and contribute a new dimension of specialized knowledge. Adding a fourth physician will enable us to uphold our commitment to personalized patient care as well." ♦



ABINGTON HIRES FULL-TIME GENETIC COUNSELOR



Due in large part to the growing interest in and availability of genetic testing, Abington Reproductive Medicine recently hired a full-time genetic counselor, Jennifer Ely, to meet with all IVF patients prior to their first cycle. For patients with a family history of a genetic disorder, Jennifer provides education and support, coordinates testing and offers follow-up counseling once patients receive their results.

"The field of genetics is changing every day as the medical community continues to unravel the genetic basis of various diseases," Jennifer explains. "Now that the human genome project is completed, we can begin exploring possible cures for these diseases, which is very encouraging for patients with a serious, inherited disorder who wish to conceive. In these types of situations, prior information and preparedness is enormously helpful."

In particular, Jennifer counsels many patients who are candidates for Preimplantation Genetic Diagnosis (PGD), a revolutionary procedure that offers a way to test embryos for genetic disorders before transferring them into the uterus. PGD can detect numerous genetic diseases, including cystic fibrosis, fragile-X syndrome, Tay-Sachs disease, polycystic kidney disease and Marfan syndrome.

Previously a prenatal genetic counselor with Genzyme Genetics in Philadelphia, Jennifer holds a master's degree in genetic counseling from the University of Pittsburgh. She has been practicing for nearly a decade.

Outside of work, Jennifer spends as much time as possible with her two young sons. ♦

Media Mentions

Several of our physicians have been featured in publications this year:

- "OC Therapy in Ganirelix Acetate Injection vs. Leuprolide Acetate Cycles," an article by Larry Barmat, M.D., appeared in the February 2005 issue of [Fertility and Sterility](#).
- In its spring 2005 issue, [Conceive](#) magazine announced the appointment of Stephen G. Somkuti, M.D., Ph.D., to its advisory board.
- "Autologous Endometrial Coculture," an article by Dr. Barmat, appeared in a recent issue of the Obstetrical Society of Philadelphia newsletter.

PARTICIPANTS NEEDED FOR STUDY TESTING ACCURACY OF OVULATION PREDICTION DEVICE

Abington Reproductive Medicine is seeking approximately 170 participants for a clinical study to test the accuracy of the Biometer, an FDA-approved device that predicts ovulation.

Manufactured by Biosense, the Biometer is a small device resembling a digital thermometer that can be used to increase the chance of conception or as a more accurate method of natural family planning. To use the Biometer, individuals insert the device into their vagina. In five seconds, the Biometer gives a digital readout indicating the user's anticipated date of ovulation, or if the user is currently ovulating.

Study participants will be required to use the Biometer to obtain daily ovulation readings for 90 consecutive days (approximately three menstrual cycles). The study will also involve some laboratory and ultrasound monitoring, and participants will be asked to record their experiences in a diary.

The results of the study are expected to play a significant role in helping couples struggling with infertility achieve pregnancy. Individuals who prefer natural family planning will benefit as well.

All participants will receive \$250 upon completion of the study. To register or for more information, please call 215-887-2010. ♦

MENTAL HEALTH CONSULTANT HELPS PATIENTS OVERCOME STRESS AND EMOTIONAL ISSUES

There is no question that infertility is emotionally trying for couples. The condition creates stress for both partners at a time when they need each other the most. As part of our efforts to provide the highest level of emotional support, Abington Reproductive Medicine is pleased to refer patients to Susan Miller, a mental health consultant with expertise in infertility-related issues. Susan counsels individuals and couples experiencing increased stress and emotions due to infertility treatment.

Along with the physicians of Abington Reproductive Medicine, Susan believes a patient's outlook on his or her situation and treatment is connected to the outcome. In other words, an upbeat, relaxed approach to infertility treatments can lead to higher pregnancy rates, while a negative or anxious attitude may reduce a patient's chances of conception.

"Having dealt with an unsuccessful treatment for secondary infertility myself, I have a pretty good idea what my patients are going through," Susan explains, "and many of them take comfort in the fact that I can relate to their situation."

When appropriate, Susan recommends alternative therapies. "Over the years I've noticed a much wider acceptance among physicians and counselors concerning the effectiveness and usefulness of alternative therapies and their impact on the mind-body connection," Susan says. "I work closely with many alternative therapy professionals, including those who practice acupuncture, polarity therapy and guided imagery."

In addition to her individual and couples therapy practice, Susan runs several therapeutic support groups. "Sharing experiences and emotions can help people better cope with their own situation," she says.

Before earning her master's degree in marriage and family therapy from Hahneman University, Susan spent 15 years working in various Philadelphia-area hospital laboratories. In her free time, she enjoys walking her dog and visiting the shore. ♦

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and research has consistently shown that multiple IUIs performed during the same cycle do not increase a patient's chances of conceiving.

This is because the key to IUI is not the number of inseminations, but the timing of them. One well-timed IUI (performed just before the expected time of ovulation) is much more effective than multiple, ill-timed inseminations. Like Abington Reproductive Medicine, most infertility practices do not perform multiple, simultaneous IUIs because medically, it is neither necessary nor beneficial.

Since most practices charge patients per insemination, receiving multiple, simultaneous IUIs will not save you money.

Do you have a question for the Abington Reproductive Medicine physicians? E-mail us at info@abington-repromed.com with your inquiry, and your question may appear in a future issue of [Reproductive Medicine Matters](#).

ABINGTON APPEARANCES

Upcoming events and seminars featuring the physicians of Abington Reproductive Medicine:

IVF Seminars

Mondays, September 26
and November 14

7 p.m.

The Toll Center for Reproductive Sciences
Abington Memorial Hospital

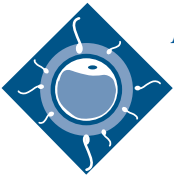
Potential patients are invited to join us for free informational seminars on in vitro fertilization (IVF). The seminars will be led by an Abington Reproductive Medicine physician and will feature staff members from the Toll Center. For more information or to register (required) call 215-481-2349.

ABINGTON REPRODUCTIVE MEDICINE HOSTS SECOND INTERNATIONAL PHYSICIAN

Turkish fertility specialist Murat Berkkanoglu, M.D., visited Abington Reproductive Medicine recently to observe firsthand our Autologous Endometrial Coculture procedure, a revolutionary technique he hopes to introduce in Turkey. Dr. Berkkanoglu learned about our practice's success with Coculture via our Web site and by reading several articles published by Abington Reproductive Medicine's Larry Barmat, M.D., who co-developed the procedure while at Cornell University.

Dr. Berkkanoglu stayed with us for three days to monitor an entire Coculture cycle, which involves placing a patient's fertilized eggs on top of a layer of cells from her own uterine lining. This is the second time Abington Reproductive Medicine has hosted a physician from a foreign country. "It is very humbling to have another international physician come here on his own accord to learn more about Coculture," says Larry Barmat, M.D. "It's also thrilling to discuss the procedure's worldwide applications." ♦

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