



Royal Devon
University Healthcare
NHS Foundation Trust



Together we can
achieve so much

Fertility
Exeter



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The team really got to know me and understood my concerns and hopes. The process would have been far more stressful if I hadn't had their support.



Fertility Exeter

At Fertility Exeter, we care about what is right for you

From your first appointment, our specialist team of Doctors, Nurses, Embryologists and Counsellors will support you through the often complicated and emotional process of fertility treatment. From consultation, through diagnostics, treatment planning and counselling, we will work with you to create a programme that is right for you.

Benefitting from the backing of the Royal Devon University Healthcare NHS Foundation Trust, yet still small enough to offer a personal service, our team will be with you at every step of the journey.

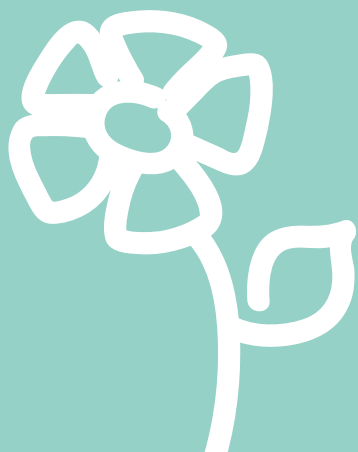


Why choose Fertility Exeter?

Fertility Exeter was the first IVF clinic in the Southwest and has been established for over 25 years

Working closely with our team of experts, you will have access to the latest evidence-based techniques and technologies for treatment.

Our clinic in Exeter is home to an experienced team of fertility professionals, many of whom have been with us for over 15 years. This dedication gives us family values and these extend to our patients. With Fertility Exeter, you can expect a holistic, supportive and personalised package of care.





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We'd been turned away from three other clinics and felt like giving up. Fertility Exeter was our last chance and we were immediately reassured by the kind and inclusive attitude of the whole team. Some of the messages were hard to hear but they were delivered with such compassion, we never lost hope.

Treatments and Services

Consultation and Diagnostics

Fertility Exeter has a multidisciplinary team of staff consisting of Doctors, Nurses, Embryologists and Counsellors who can help to determine the cause of, and map out the most effective solution to your subfertility. This may include a number of tests and investigations to help with the diagnostic process.

Semen Analysis

This is a test to check the 'quality' of sperm, which gives an indication, although not an absolute assessment, of a man's fertility potential. It involves looking at a semen sample under the microscope to see how many sperm there are, what proportion are moving forward well, and what proportion have a 'normal' shape. A 'trial preparation' may be recommended to help decide what type of fertility treatment is most appropriate.

Intra-uterine Insemination Treatment (IUI)

IUI involves using a catheter to put washed, prepared sperm near the top of the cavity of the womb around the time of ovulation to increase the chance of getting pregnant. This is usually combined with ovulation induction drugs to ensure optimal timing of IUI.

Donor Insemination (DI)

DI follows the same process as IUI but uses screened, prepared donor sperm.

In-vitro Fertilisation (IVF)

IVF is the process of creating embryos in the laboratory and placing them back in a woman's womb to achieve a pregnancy. Eggs are taken from a woman's ovaries after she has taken drugs to stimulate egg development. The eggs are mixed with

sperm to create embryos (fertilised eggs) which are then replaced in the woman's womb two to six days after egg collection with the hope of conception. The law relating to IVF limits the number of embryos that can be transferred. If there are suitable embryos remaining after embryo transfer, they may be frozen.

Intracytoplasmic Sperm Injection (ICSI)

ICSI is an additional process in IVF in which a single sperm is selected from the processed semen sample using a special microscope and advanced micromanipulation equipment. An individual sperm is injected into each suitable egg to create an embryo. This technique is reserved for those couples where there are issues or problems with sperm that may significantly increase the risk of a complete failure of fertilisation.

Surgical Sperm Recovery (SSR)

Surgical sperm retrieval is the retrieval of sperm directly from the epididymis or testicles in male partners with azoospermia. Azoospermia is the absence of sperm in the ejaculate. SSR can also be used for men who cannot ejaculate. The retrieved sperm can be used for fertilisation immediately or stored for future fertility treatment.



Frozen Embryo Transfer (FET)

If suitable embryos have been cryopreserved after an IVF cycle, or for fertility preservation, an FET can be considered. The lining of the womb is prepared with a series of hormone drugs to optimise the receptivity of the lining of the womb prior to the warming of the embryo/s and replacement within the woman's womb.

Egg Donation

Eggs can be donated from a fertile donor to a woman whose own egg reserve is reduced for a number of medical conditions. Donors may be egg-sharing donors who donate as part of their own treatment, or as altruistic donors who donate all their eggs in a non-treatment cycle.

Sperm Banking

Sperm banking is a process of storing sperm in a deep-frozen state for short or long periods. The sperm are mixed with a special fluid to protect them from the harmful effects of freezing before being frozen and stored. Banking is indicated when there are factors likely to affect the future fertility of a male who has reached puberty such as treatment for cancer or conditions needing drugs known to cause fertility problems or abnormalities in pregnancy. Sperm banking can also be provided for couples needing assisted conception where the man is likely to be absent due to circumstances beyond his control and for cases of male to female gender reassignment.

Egg Banking

Egg banking is a process of storing eggs, obtained in a similar way as for conventional IVF, from a female who has reached puberty. The eggs are mixed with a special fluid to protect them from the harmful effects of freezing before being frozen and stored; for short or long periods. Egg banking is offered when there are factors that may affect future fertility.

Embryo Banking

Suitable, surplus embryos following IVF treatment and a fresh embryo transfer, may be frozen and stored for future use. Embryo storage may also be considered for those seeking fertility preservation like most sperm and egg bankers, or if a fresh embryo transfer is not clinically advised. Embryos are frozen in a similar way to eggs.



We are motivated by success, and you are part of the team

We understand that there is no standard approach to fertility treatment. Each of our patients is on their own unique journey and our vast expertise allows us to create bespoke packages to support this.

Our patients come to us with such varied stories so our approach has never been one-size-fits-all. We pride ourselves on offering initial consultations to a wider number of people than most other clinics. We do not select patients but choose instead to provide an honest opinion on the chance of success. This allows those wishing to pursue treatment the opportunity to do so in a fully informed way.

We are often asked for statistics regarding the number of cycles we carry out each year and their outcome but it can be difficult to make a meaningful comparison of success rates between clinics. This is because other clinics

may use specific selection criteria such as not treating those with a poor prognosis or only offering IVF to patients who would also have a high chance of success with less invasive IUI treatments. Factors such as age, diagnosis and duration of subfertility can all influence success rates too.

Please remember that overall success rates do not, on their own, indicate what an individual patient's chances will be.

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Our Consultant was really clear with us from the start about our chances of success, and we appreciated the honesty with which this was discussed with us. We were given plenty of time to ask all of the questions we had and felt fully informed when it came to taking the next step.’



Some of the facts

Passionate about helping to create families

We have a close knit team who will welcome you to the heart of it. We are committed to providing the very best service for patients. When you come to Fertility Exeter, you will meet a team that feels privileged to care for you.

Your first point of contact will usually be our friendly reception and admin staff. Our Nurses come from a range of backgrounds and bring immense expertise to the service. Thanks to our excellent reputation, our Embryologists and Senior doctors have relocated from all over the country to join us in Exeter. We may be biased but we believe we have the cream of the crop.

Personalised service

Our fertility treatment options are as individual as the patient having them. Whatever your circumstances, we commit to finding the right options for your personal needs. Our multidisciplinary team works together closely to establish the best pathway for you and our counsellors are on hand to provide extra support if you need it.

Support

Struggling to conceive and undergoing fertility investigations and treatment can cause considerable distress to individuals; it is often described as an “emotional rollercoaster”. Fertility Exeter recognises the need to provide psychosocial support to patients, partners and donors.

Our independent Counsellor works with Fertility Exeter to ensure your emotional well-being is taken care of throughout your journey. They understand how challenging your experience may be at times and would be pleased to see you at whatever stage of the



process you are at, so as not to feel alone. In addition to providing emotional support, the service provides implications counselling for those who are donating or receiving donated eggs or sperm.

All members of the Fertility team are committed to supporting you before, during and after your treatment, with patient support being at the centre of delivering our services.

NHS and self-funded treatment options available

As part of the Royal Devon & Exeter Foundation Trust, we offer NHS services and self-funded treatments for patients that do not meet NHS funding criteria. The first step is to see your GP who can provide advice, and then refer you to the clinic if necessary. Patients intending to self-fund can self-refer using a self-referral form that can be found on our website.

We look forward to meeting you.

Feedback

Here at Fertility Exeter, we care about getting things right for our patients. As such we would welcome any feedback that you may have, to help us continually improve the services we provide. You can do this in a number of ways:



Patient Advice & Liaison Service (PALS)
Royal Devon and Exeter Hospital
(Wonford)
Barrack Road
Exeter
EX2 5DW



Direct Dial: (01392) 402093



rduh.pals-eastern@nhs.net

You can also provide feedback about Fertility Exeter directly to the HFEA by using their online feedback tool:
<https://www.hfea.gov.uk/choose-a-clinic/rate-your-clinic/>



“What went well could go better if”

Please complete a yellow card, located in our waiting room, and put it in the box provided. The box is sorted weekly and suggestions are acted on accordingly.

Alternatively:

★ Complete our Patient Surveys on our website
www.fertilityexeter.co.uk

★ See our Patient Survey links in our emails.



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