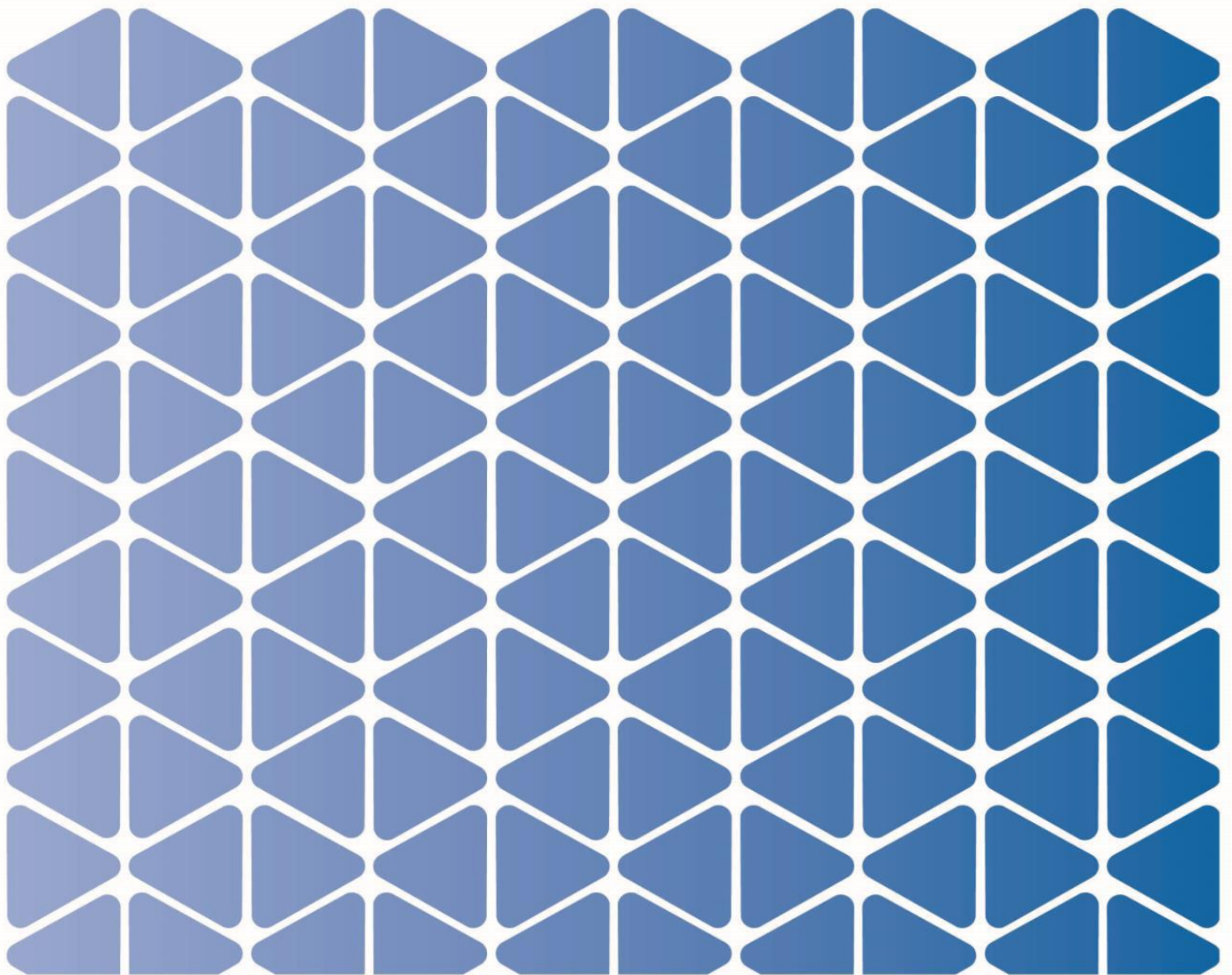


## PATIENT INFORMATION

Worcester Fertility Clinic

# OVARIAN HYPERSTIMULATION SYNDROME



## **Ovarian Hyperstimulation Syndrome**

Ovarian hyperstimulation syndrome (OHSS) occurs when the ovaries become suddenly enlarged with an accumulation of fluid in the abdomen. It is a complication that is most commonly associated with IVF (in vitro fertilisation), ICSI (intra cytoplasmic sperm injection) and occasionally with IUI and gonadotrophin therapy. There are varying degrees of severity of the problem. Severe cases requiring hospital admission are not common (3–8 %). The risk also increases if you have suffered from the problem before or have an associated factor (see below).

OHSS occurs because the ovaries are being stimulated by the hormones that you are given and the ovaries become excessively enlarged and swollen due to the number of follicles being produced.

Some of the symptoms of OHSS are:

- ❖ Abdominal discomfort/ abdominal pain
- ❖ Nausea
- ❖ Vomiting
- ❖ Loose stools
- ❖ Abdominal distension

In approximately 3 – 8% of cases OHSS can become more severe, the above symptoms worsen and it can lead to a build up of fluid in the tummy, rapid weight gain, difficulty breathing, and difficulty passing urine and feeling very unwell.

If you feel that you are suffering from any of the above symptoms do not hesitate to seek medical advice.

If you have had IVF/ICSI contact the unit where treatment was received for advice. If you experience difficulty contact the Fertility Clinic/EPAU at Worcestershire Royal Hospital 9.00am - 4.30pm Monday to Friday. Outside of these hours it is best to seek advice at your local Accident and Emergency department.

In very rare cases OHSS can develop further and become life threatening. Possible further complications include the twisting of swollen ovaries, collection of fluid around the heart, lungs, loss of kidney function and production of blood clots.e.g. deep venous vein thrombosis (DVT).

No one knows why some women develop OHSS and others have no problems at all. There are some factors though that are thought to increase the risk of you developing it, these are:

- ❖ Under 30 years old
- ❖ Underweight for your height
- ❖ Having polycystic ovaries (PCOS)
- ❖ Previous episode of OHSS whilst undergoing treatment

Treatment for OHSS will depend on the severity of your symptoms. We may simply encourage you to drink plenty of water, monitor your ovaries regularly by ultrasound and check your bloods. In severe cases it may be necessary to admit you to hospital, replace fluids through a drip, monitor your urine output with a urinary catheter and ensure that any discomfort is controlled.

At the clinic where you are receiving treatment the staff will help to minimise your chances of developing OHSS by observing closely how your body reacts to the medication that you are being given through regular ultrasound scans and occasionally blood tests.

Should you develop OHSS the cycle that you are currently undergoing will be cancelled and we suggest that you refrain from intercourse until you have had your next period. Once you have had your period if your symptoms were only mild you will find that they resolve. Should you find that you are pregnant the symptoms can last for up to several weeks.

### **IVF / ICSI Patients**

Depending on the severity of your symptoms and where you are having the IVF treatment will depend on what they will do regarding the continuation of your treatment.

In some cases it may be necessary to stop treatment for this cycle, due to health risks, and carry on when you have recovered. If you have had the injections but not the egg collection then when the treatment is restarted you will be commenced on a lower dose of drugs and monitored closely. If you have had egg collection and your treatment centre wishes to suspend your treatment if the embryos are of suitable quality the fertility unit may offer embryo freezing.

**If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.**

### **Patient Experience**

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

### **Feedback**

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

### **Patient Advice and Liaison Service (PALS)**

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

### **How to contact PALS:**

**Telephone Patient Services: 0300 123 1732 or via email at: [wah-tr.PET@nhs.net](mailto:wah-tr.PET@nhs.net)**

### **Opening times:**

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.