AUTHORIZATION FOR CLOMIPHENE THERAPY

Clomiphene therapy has been recommended for me.

The nature and purpose of the medication have been fully explained to me. The potential benefits and risks of the treatment, the likely result without treatment, and the available alternatives also have been explained.

In summary, I understand:

a. The purpose of clomiphene therapy is to increase the likelihood of pregnancy. Clomiphene works by stimulating the ovaries to develop one or more follicles that contain eggs.

b. I will be taking clomiphene citrate orally in a regimen explained to me.

c. Risks include:

   i. Ovarian Hyperstimulation (OHSS) - Occurs rarely in clomiphene cycles when an excessive number of follicles develop. When severe, it can result in blood clots, kidney damage, ovarian twisting (torsion), and chest and abdominal fluid collections. In severe cases, hospitalization is required. The best way to prevent OHSS is not to give hCG to induce ovulation and to cancel the cycle when the ovaries are over stimulated.

   ii. Multiple Gestation - About 8% of pregnancies resulting from clomiphene are twins with less than 1% triplets or higher order gestations, compared with a rate of 1 or 2% in the general population. High order multiple gestation pregnancy is associated with increased risk of pregnancy loss, premature delivery, infant abnormalities, handicap due to the consequences of very premature delivery, pregnancy induced hypertension, hemorrhage, and other significant maternal, fetal and/or neonatal complications.

   iii. Ectopic (Tubal) Pregnancies - While ectopic pregnancies occur in 1 to 2% of all pregnancies, in gonadotropin cycles the rate is slightly increased at 1 to 3%. Ectopic pregnancies may be treated with medicine or surgery. Combined tubal and intrauterine pregnancies (heterotropic pregnancies) occasionally occur with gonadotropin therapy and need to be treated with surgery.

   iv. Birth Defects - The rate of birth defects after gonadotropin cycles is no higher than in the general population, at 2 to 3%. Furthermore, these children are developmentally no different than their peers.

   v. Adnexal Torsion (Ovarian Twisting) - In less than 1% of cycles the stimulated ovary can twist on itself, cutting off its own blood supply. Surgery is required to untwist the ovary and in some cases, it may be necessary to remove the ovary.

   vi. Ovarian Cancer - The risk of ovarian cancer seems in part related to the number of times a woman ovulates. Infertility increases this risk; birth control pill use decreases it. Controversial data exists that associates ovulation stimulation drugs, like clomiphene, to the risk of future ovarian cancer. While research is underway to help clarify this issue, the careful use of clomiphene is still reasonable, especially considering that pregnancy and breastfeeding reduce ovarian cancer risk.

I also understand that with any therapy there is always the possibility of an unexpected complication, and that no guarantees or promises can be made concerning the results of any procedure or treatment.

I have read the above consent and had any additional questions answered by my doctor.

I hereby consent to the course of clomiphene therapy recommended for me.

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Signature of patient

__________________________
Date