



CLOMID

Clomid (clomiphene citrate) was first synthesized in 1956 and introduced for clinical trials in 1960. Since then, Clomid has been widely used as a “first line” treatment to induce and regulate ovulation. Clomid is typically administered on either day's three to seven or day's five to nine of the menstrual cycle with “day one” defined as the first day of normal menstrual flow.

Clomid works at the hypothalamus, a small gland at the base of the brain. Clomid stimulates the production of gonadotropin releasing hormone (GnRH), which stimulates the pituitary gland to produce follicle stimulating hormone (FSH). FSH stimulates the development of the ovarian follicles which contain the eggs.

Clomid is taken orally and should be taken at the same time each day. The “fertile time,” or the time of ovulation usually occurs five to eight days after the last Clomid tablet is taken.

Clomid has been used for many years and is considered a safe and effective medication. It does, however, have risks and occasionally there may be side - effects. Clomid side - effects can include abdominal discomfort often described as “fullness and / or soreness,” hot flashes, moodiness, or visual disturbances. Acetaminophen (Tylenol) can help with these symptoms. In a few patients, Clomid can cause enlargement of an ovary; if this occurs, a patient is advised to seek an internal examination by her physician.

Clomid is associated with a 10% incidence of multiple births, but the vast majority of these multiple births are twins. There is no increased risk of birth defects. If Clomid has not produced a pregnancy within three to six months, alternate modes of treatment should be pursued. The literature strongly supports that using Clomid beyond six months is unlikely to result in pregnancy.

CCCT (Clomid Challenge):

For Clomid Challenge Test: this is a test of a patient's sensitivity to ovulation induction with Clomid. (Used more for patient's over 37 years of age or with PCO). A day 3 FSH and estradiol level are drawn (current cycle), Clomid (100mg) is taken per directions below and a day 10 FSH level is drawn. Levels of FSH pre and post Clomid challenge suggest the patient's likelihood of successful conception with Clomid induction alone.

CLOMID INSTRUCTIONS

Clomid is available in a 50mg pill. Although we start patients on a 50mg dose, we may eventually need to increase your dose to 100mg (2 pills) or even 150mg (3 pills).

Use the attached chart to stay organized. Start a new chart on the first day of each cycle, which is the first day of your period.

Clomid is taken for 5 days on days 3,4,5,6,7 of your cycle. Take 1 pill per day unless otherwise instructed. Mark the medication on your chart. Estrogen (estradiol) is taken daily for the next 5 days on days 8,9,10,11,12.

You will usually ovulate between days 12-16 of the cycle. Use an ovulation predictor kit to check your urine during this time, and mark the results on your chart. Intercourse is recommended every 2 days during the week of days 11-17. You will usually begin your menstrual cycle between days 25-30. This will begin a new cycle.

Please call on the 1st day of your period before starting your 2nd cycle on Clomid. You will take the Clomid pills on days 3-7 and the estradiol on days 8-12 as usual during this cycle. We need to schedule an appointment for you during days 20-25 of the 2nd cycle, so please call as soon as you get your period. At this appointment, we will do an endometrial biopsy and a progesterone level.

The endometrial biopsy takes a tiny pinch of tissue from the uterine lining. Analysis of this tissue tells us whether you ovulated and whether the uterine lining is “in phase” and, therefore, properly prepared to nourish an embryo. The progesterone level tells us whether you are making sufficient hormone to maintain a healthy lining.

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Depending on the results of these tests, we may need to change your Clomid dose starting the 3rd month of medication. We may also need to give you supplemental progesterone (Procheive 8% vaginal gel or Prometrium oral tablets) if your level is low.

You may experience some mild hot flashes, headache, or bloating while taking this medication, so do not be alarmed if these symptoms appear. In patients that will get pregnant on this therapy, about 80% of those pregnancies will occur during the first 6 months of therapy. Be aware that the chance of twins increases from 1% (general population) to 8% on Clomid!