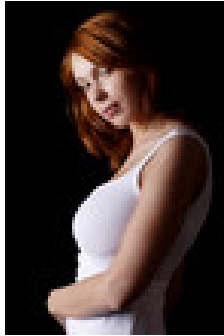


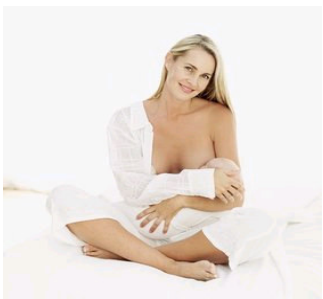
Premature Menopause

The average age of menopause is 51 years. However, there is a huge variation amongst individuals; some women go into menopause earlier and others later. The age when fertility is lost is determined not only by the number of eggs that are left in the ovaries, but also the quality of these eggs. The quality of the human egg starts to deteriorate after the age of 35. The average woman is practically infertile after the age of 41. Just as there is a huge variability in the age of menopause, there is also variability in the age when fertility is lost.

There is evidence from many lines of research that the time period between loss of fertility and menopause is more or less stable at around ten years. It is estimated that 10% of women in the general population go into menopause before the age of 46.



On this basis it is estimated that 10% of women in the general population will be infertile when they reach their late thirties, having started a rapid decline of their fertility much earlier, possibly in the early thirties. This is called "early ovarian ageing".



Background

The age of menopause (when periods stop) depends on the number of eggs in the woman's ovaries, the so called "ovarian reserve", and this is determined mainly by genetic factors. However, various other factors in a woman's history, either before or after birth, can have an effect.

Women are born with 2 million eggs on average. Eggs are lost continuously throughout a woman's life and this process continues even when a woman is pregnant or on the contraceptive "pill". Most of the eggs "die", a process known as "apoptosis", and only around 400 eggs are ovulated and can be fertilised. The stock of human eggs cannot be renewed after birth. Women go into menopause when there are fewer than a thousand eggs left in their ovaries.



Early ovarian ageing

Young women who have "early ovarian ageing" do not have any symptoms. They have regular menstrual cycles and ovulate normally and can have children when they are still very young. However, when they reach their late thirties they are infertile. It is desirable to be able to predict which women are at risk of "early ovarian ageing" while they are still very young. Technological progress in Assisted Reproduction has made this theoretically possible, but the work is continuing.

Ovarian Reserve Tests

Over the last 20 years a number of tests have been developed in order to predict a woman's chances of success during an IVF cycle. They are called "ovarian reserve tests".

Some of these tests can be applied to women in the general population, in order to find the ones whose ovaries are ageing faster than expected. Most of them are simple blood tests or ultrasound scans, but there are also more complex tests. The most commonly used tests are the FSH, Estradiol, inhibin-B and AMH. They generally need to be done at the beginning of the menstrual cycle, during menstruation, ideally between day 2-5.

It is critically important to realise that most of the ovarian reserve data that are available to us come from infertile women who attended fertility Units, rather than healthy women in the general population. There is an urgent need for data from asymptomatic women in the general population in order to create normal charts.

In terms of predicting IVF outcome the tests have generally been proven to be very good at predicting the number of eggs a woman can produce in response to stimulation with drugs, but are quite poor at predicting live-births. The reason is that the tests can assess indirectly the number of eggs a woman has, but not the quality of these eggs.

The Women's **Wellness** Centre *can help*

"Early ovarian ageing" was first described in 2003 by Nikolaou and Templeton and has since attracted a growing international interest. A lot of research is underway, including an association of early ovarian ageing with early general ageing and also the factors that can predispose or protect from early ovarian ageing. Mr Nikolaou collaborates with the Women's Wellness Centre (WWC) and is able to see and advise women and their doctors.

An educational program is well under way at the WWC and there will be more sessions on fertility and ovarian reserve. We feel that there is an enormous amount of information available to women from many different sources, including the internet. What is much harder to find is good advice.

At this stage our priority is to offer responsible advice based on good clinical evidence and clearly separate the facts from the hypotheses. Reproductive advice has to be individualised and based on a thorough assessment of a woman's general and reproductive history and particular circumstances, rather than a simple test result. We recommend, therefore, that all women are actually seen at least once.

Prices

Consultation with a scan: £580

Consultation without a scan: £480

For further information on how to arrange a test and consultation please ask at our reception or ring 0207 751 4488

About The Centre

Calming

The Centre has been designed to provide a calming and homely environment with ample waiting space and a children's play area.



Contemporary



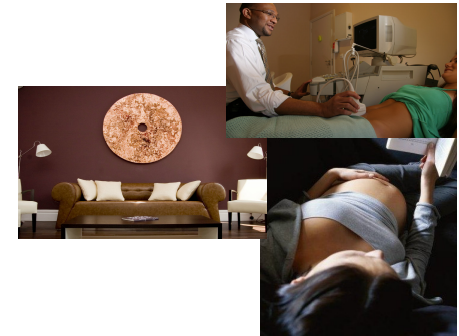
All areas are spacious and equipped to the highest specification and the highest standards of private healthcare, to provide the best environment for women to have their consultations.

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Ovarian Reserve Screening Tests

at
The Women's
Wellness
Centre

An information leaflet for
patients and clinicians



A Private Health Care Facility in
the Heart of Chelsea Dedicated
to Women's Health