What is clomiphene and why is it prescribed?
Clomid (clomiphene citrate) is used in women who do not ovulate (produce eggs) regularly each month leading to infertility. Clomid stimulates ova (eggs) to develop in the ovaries and be released ready for fertilisation.

How should this medicine be used?
- Clomid is a tablet taken by mouth.
- It is started on day 2 of the menstrual cycle (day 1 is the day you wake up bleeding) and initially a 50 mg tablet is taken once a day for 5 days. To help you remember to take Clomid, take it around the same time every day.
- Ovulation usually occurs 5-12 days after the last Clomid tablet.

What if you have no menstrual cycle?
If you do not have regular, or have very infrequent periods, you will be given a progestin (such as Provera) to induce bleeding. Then begin the Clomid on the second day after your induced period has started.

When is the optimal time to have intercourse?
The best time to have intercourse is from 5 days after the last Clomid tablet (day 10 in the cycle) every other day for one week; although it is recommended, when trying to achieve a pregnancy, to have regular sexual intercourse 2-3 times per week.
How is the response to treatment monitored?

In first treatment cycle:

1. A blood test will be performed in the second half of the cycle (14-16 days after the last Clomid tablet) to measure the progesterone level (usually on day 21). This will enable us to see if you have ovulated.

2. If you ovulate but do not conceive and menstruation occurs, the same dose of Clomid is repeated in the following cycles.

3. If bleeding does not occur by 6 weeks after your last Clomid tablet, you should have a pregnancy test. If you are pregnant, you will not require further treatment and should report to your family doctor.

4. If your pregnancy test is negative, repeat the test in one week to confirm the result.

5. If you are not pregnant, start another cycle of Clomid treatment at the same dose.

6. Your Reproductive Medicine team will review your response to treatment and may increase the dose of Clomid to 100mg if you do not appear to be ovulating. This will again, need to be taken daily for 5 days. Steps 1-5 will be repeated.

7. If your progesterone concentrations remain low, this indicates that you are still not ovulating in response to the treatment. The dose of Clomid could be further increased to 150 mg per day for 5 days for the following cycles. This would only be recommended following discussion with your consultant team.

8. **Do not** increase the dose yourself.

9. Ultrasound monitoring is usually not required.

10. You will only be given a maximum of 12 cycles due to the increased risks/side effects associated with Clomid (see overleaf).
What should I do if I forget a dose?
Take the missed dose as soon as you remember it. However, if it is almost time for the next dose, call your doctor for additional directions. Do not take a double dose to make up for a missed one.

What side effects can this medication cause?
Side effects with Clomid are not common and tend to be dose related.

More frequent symptoms include:
• Hot flushes.
• Abdominal discomfort (bloating or soreness).
• Headache.
• Breast discomfort.
• Menstrual irregularities with bleeding or spotting between cycles.

Occasionally visual symptoms can occur, including blurred or double vision and visual spots or flashes. If these occur you must stop treatment and inform your doctor immediately. If you experience stomach swelling, weight gain or shortness of breath you must also contact your doctor immediately.

Prolonged use of Clomid (more than 12 cycles of treatment) may increase the risk of ovarian cancer and for this reason it is generally not used for more than 12 cycles of treatment.

Response to treatment
Approximately 7 out of 10 patients treated with Clomid will ovulate and 4 out of 10 will conceive. Most women who will ovulate do so during the first three months of treatment. If you are ovulating and have not conceived after 6 cycles, other methods of ovulation induction should be considered.
Multiple pregnancy

The incidence of twins is increased to 5-10%, but multiple births of more than twins are rare (less than 0.5%).

The rate of miscarriage is not increased, nor is the incidence of congenital anomalies.

If you have any further questions please contact:

Department of Reproductive Medicine
Old Saint Mary's Hospital
Oxford Road
Manchester
M13 9WL

(0161) 276 6209 - 8.00 am - 11.00 am, 7 days a week except bank holidays.

Useful websites:

NHS Choices: www.nhs.co.uk
Infertility Network UK: www.infertilitynetworkuk.com

Violence, Aggression and Harassment Control Policy

We are committed to the well-being and safety of our patients and of our staff. Please treat other patients and staff with the courtesy and respect that you expect to receive. Verbal abuse, harassment and physical violence are unacceptable and will lead to prosecutions.
Suggestions, Concerns and Complaints

If you would like to provide feedback you can:

• Ask to speak to the ward or department manager.
• Write to us: Patient Advice and Liaison Services, 1st Floor, Cobbett House, Manchester Royal Infirmary, Oxford Road, Manchester M13 9WL
• Log onto the NHS Choices website www.nhs.uk - click on ‘Comments’.

If you would like to discuss a concern or make a complaint:

• Ask to speak to the ward or department manager – they may be able to help straight away.
• Contact our Patient Advice and Liaison Service (PALS) – Tel: 0161 276 8686 e-mail: pals@cmft.nhs.uk. Ask for our information leaflet.

We welcome your feedback so we can continue to improve our services.
Please use this space to write down any questions or concerns you may have.
No Smoking Policy

The NHS has a responsibility for the nation’s health. Protect yourself, patients, visitors and staff by adhering to our no smoking policy. Smoking is not permitted within any of our hospital buildings or grounds.

The Manchester Stop Smoking Service can be contacted on Tel: (0161) 205 5998 (www.stopsmokingmanchester.co.uk).

Translation and Interpretation Service

These translations say "If you require an interpreter, or translation, please ask a member of our staff to arrange it for you." The languages translated, in order, are: Arabic, Urdu, Bengali, Polish, Somali and simplified Chinese.

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