



PATIENT FACT SHEET

Ovarian Drilling for Infertility

This fact sheet was developed in collaboration with The Society of Reproductive Surgeons

If you have polycystic ovary syndrome (PCOS), you may have very irregular cycles. This usually means that you may have difficulty getting pregnant because you don't ovulate or release an egg on a regular basis. This medical condition changes the amount of important substances, called hormones, that your body produces. You end up with too much testosterone (yes, women, not just men, produce testosterone!) and insulin.

Certain medications may be helpful in making the cycles or some hormone levels more normal in these patients. Birth control pills can make you have a monthly cycle, but will prevent you from becoming pregnant. Clomiphene, a fertility drug that is taken by mouth, may help you ovulate on a more regular basis. Metformin lowers insulin levels and is generally reserved for PCOS patients who have problems with insulin levels. All of these drugs may improve the symptoms of PCOS.

The use of a surgical procedure called ovarian drilling can help promote normal menstrual cycles and lower testosterone levels. This may make it easier for you to get pregnant.

What happens if I have too much testosterone?

High levels of testosterone cause some symptoms of PCOS. You may have more body hair than most women. In addition, you may be overweight. Your periods may be irregular. Your ovaries may not release eggs every month, so you probably don't ovulate regularly and you may have a difficult time becoming pregnant.

What is ovarian drilling?

In patients with PCOS, your ovaries typically have a thick outer surface and you may produce more testosterone than women without PCOS. Ovarian drilling breaks through the thick outer surface and the drilling also reduces the amount of testosterone your ovaries make. In this laparoscopic (minimally invasive) procedure, a tiny camera attached to a thin telescope is inserted into a small incision (surgical opening) below your belly button. Special tools are inserted at other on your belly. These tools make very small holes in your ovaries, which help reduce testosterone production. You may get your period regularly and you should start to ovulate.

Will I get pregnant after ovarian drilling?

Your chances of pregnancy are good as long as your menstrual cycles become more regular and no other problems make it hard for you to conceive. In the year after ovarian drilling, about half of the patients get pregnant. You are less likely to get pregnant with twins or triplets after ovarian drilling than if you are taking fertility drugs. However, your cycles may become irregular again as time goes by.

Sometimes menstrual cycles do not become more regular after this surgery, but it may be easier to induce ovulation with fertility drugs after the surgery.

What are the risks of ovarian drilling?

This surgery could cause injury to your intestines, bladder, blood vessels, and ureter. You could also have bleeding, an infection, or a reaction to anesthesia. There is a risk of death, but it is rare.

If there is too much damage to the ovary, you may run out of eggs at a younger age and go through menopause (which is when you stop getting your period). After the surgery, adhesions or scar tissue can form between the ovaries and the fallopian tube, which carries the egg out of the ovary into the uterus. If you develop adhesions, it may be more difficult for you to get pregnant.

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