

## Ovarian Hyperstimulation Syndrome

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<b>Approved by:</b>	Gynaecology Governance Meeting
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<b>This is the most current document and should be used until a revised version is in place</b>	

Key Amendments		
Date	Amendment	Approved by
26 <sup>th</sup> January 2019	Documents extended for 3 years	Mr Hughes
14 <sup>th</sup> December 2020	Documents extended for 3 years	Alex Blackwell
29 <sup>th</sup> December 2023	Document extended for 6 months whilst under review Owner updated to Kiritea Brown	Alex Blackwell
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Ovarian hyperstimulation syndrome (OHSS) occurs when the ovaries become suddenly enlarged with an accumulation of fluid in the abdomen. It is a complication that is most commonly associated with IVF (in vitro fertilisation), ICSI (intra cytoplasmic sperm injection) and occasionally with IUI and gonadotrophin therapy. There are varying degrees of severity of the problem. Severe cases requiring hospital admission are not common (3–8 %). The risk also increases if you have suffered from the problem before or have an associated factor (see below).

OHSS occurs because the ovaries are being stimulated by the hormones that you are given and the ovaries become excessively enlarged and swollen due to the number of follicles being produced.

Some of the symptoms of OHSS are:

- ❖ Abdominal discomfort/ abdominal pain
- ❖ Nausea
- ❖ Vomiting
- ❖ Loose stools
- ❖ Abdominal distension

In approximately 3 – 8% of cases OHSS can become more severe, the above symptoms worsen and it can lead to a build up of fluid in the tummy, rapid weight gain, difficulty breathing, and difficulty passing urine and feeling very unwell.

If you feel that you are suffering from any of the above symptoms do not hesitate to seek medical advice.

If you have had IVF/ICSI contact the unit where treatment was received for advice. If you experience difficulty, it is important to contact your GP or Emergency Gynaecology Assessment Unit on 01905 761489, or attend Accident and Emergency.

In very rare cases OHSS can develop further and become life threatening. Possible further complications include the twisting of swollen ovaries, collection of fluid around the heart, lungs, loss of kidney function and production of blood clots.e.g. deep venous vein thrombosis (DVT).

No one knows why some women develop OHSS and others have no problems at all. There are some factors though that are thought to increase the risk of you developing it, these are:

- ❖ Under 30 years old
- ❖ Underweight for your height
- ❖ Having polycystic ovaries (PCOS)
- ❖ Previous episode of OHSS whilst undergoing treatment

Treatment for OHSS will depend on the severity of your symptoms. We may simply encourage you to drink plenty of water, monitor your ovaries regularly by ultrasound and check your bloods. In severe cases it may be necessary to admit you to hospital, replace fluids through a drip, monitor your urine output with a urinary catheter and ensure that any discomfort is controlled.

At the clinic where you are receiving treatment the staff will help to minimise your chances of developing OHSS by observing closely how your body reacts to the medication that you are being given through regular ultrasound scans and occasionally blood tests.

Should you develop OHSS the cycle that you are currently undergoing will be cancelled and we suggest that you refrain from intercourse until you have had your next period. Once you have had your period if your symptoms were only mild you will find that they resolve. Should you find that you are pregnant the symptoms can last for up to several weeks.

### **IVF / ICSI Patients**

Depending on the severity of your symptoms and where you are having the IVF treatment will depend on what they will do regarding the continuation of your treatment.

In some cases it may be necessary to stop treatment for this cycle, due to health risks, and carry on when you have recovered. If you have had the injections but not the egg collection then when the treatment is restarted you will be commenced on a lower dose of drugs and monitored closely. If you have had egg collection and your treatment centre wishes to suspend your treatment if the embryos are of suitable quality the fertility unit may offer embryo freezing.