

Clomid is a medication that induces or enhances ovulation in women by coordinating signals from the pituitary gland in the brain to the ovary that stimulate one or more follicles (fluid filled sac that surrounds the egg) to grow and mature.

General Protocol:

Please contact the office during business hours with the onset of your menstrual cycle (**Cycle Day 1**) which is considered the first day of full flow, not just spotting. **If your cycle starts on the weekend, please contact the office early Monday morning (office opens at 7 am).** You will be scheduled for a **baseline visit** between **Cycle Day 2-5** before starting treatment followed by one or more monitoring visits a few days after taking the last CC tablet to assess your ovarian response to treatment. These visits include bloodwork and transvaginal pelvic ultrasounds between 7-9 AM in the office. You will receive test results and instructions each afternoon after your appointment.

Clomid can be started on Cycle Day 2-5 and continued for five consecutive days. The daily dosage varies from 50 mg (one pill) to 150 mg (3 pills) depending on your individual characteristics and response. Once it is determined that the follicles/eggs are mature based on your monitoring visits, you may be prescribed a medication to induce ovulation which consists of a single subcutaneous injection called Human Chorionic Gonadotropin (**hCG/Ovidrel**) also commonly known as a “trigger shot”. Then you will be scheduled for intrauterine insemination (IUI) or timed intercourse usually 24-36 hours after the injection depending on your monitoring results and treatment plan.

If you check ovulation predictor kits (OPKs) at home during the cycle, please note you will get a false positive result up to 3 days after the last Clomid pill. You should only check OPKs if you’re instructed to do so. A home urine pregnancy test should be done two weeks after IUI or timed intercourse. Of note, you may have a falsely positive pregnancy test for several days following the hCG/Ovidrel injection or “trigger shot”.

Side Effects & Risks:

Patients may experience hot flashes, mood changes, and headaches while taking Clomid due to its anti-estrogen effects. Occasionally patients develop benign ovarian cysts which are rarely significant and usually resolve spontaneously. More common side effects can include abdominal discomfort or bloating, low back pain, and breast tenderness which usually occur after 1-2 weeks of taking the medication. Rarely, patients may experience visual disturbances such as blurred vision or flashing lights. In such cases, discontinue the medication and contact our office.

Risks of treatment include multiple pregnancy which occurs in approximately 8% of patients who conceive, with the majority being twin gestations. If too many follicles develop as noted during monitoring, your cycle may be canceled to limit the risk of multiple pregnancy. Rarely, ovarian hyperstimulation or torsion may occur.