For many years it has been known that pituitary gonadotropins are in control of menstrual cycle dynamics and ovulation. Over thirty years ago the introduction of medications that were capable of inducing ovarian function through indirect or direct gonadotropin stimulation revolutionized the treatment of reproductive disorders in both men and women.

This book covers all aspects of ovulation induction that a clinician needs to know including all known current stimulation protocols and induction strategies. It is directed at all gynaecologists, infertility professionals, both medical and paramedical including postgraduate students.

Contents: Regulation of Gonadotropin Secretion; Human Ovulation and Transvaginal Sonography; Clomiphene Citrate for Ovarian Stimulation; Tamoxifen Citrate for Ovulation Induction; Ovulation Induction: Traditional Superovulation with Gonadotropins; Combination Protocols Using Clomiphene Plus Gonadotropins; Step-up Protocols; Ovulation Induction; Step-down Protocols; Monitoring of Stimulated Cycles; Ovarian Stimulation Protocols for IUI; Cancelled Cycles in Poor Response – What Next? Induction of Ovulation in Hypogonadotropic Hypogonadism: Pulsatile GnRH or Gonadotropins? Management of
Hyperprolactinemia; Ovulation Induction and Thyroid Dysfunction; Induction of Monofolliculogenesis in Patients with Poly Cystic Ovary Syndrome; Adjunctive Glucocorticoids in ovulation Induction for Polycystic Ovarian Syndrome; Metformin Treatment of Clomiphene-Resistant Polycystic Ovary Syndrome; Laparoscopic Ovarian Drilling for Surgical Induction of Ovulation in Polycystic Ovarian Syndrome; Ovarian Hyperstimulation Syndrome; The Role of Gonadotropin-Releasing Hormone Agonists in Ovulation Induction; Role of GnRH Agonists as an Ovulation Trigger; Depot GnRH Agonists in Gonadotropin Induced Cycles; Clinical Application of Recombinant Follicle Stimulating Hormone; Poor Responders in Assisted Reproductive Technology: A Blueprint for Management; Luteal Phase Support in Controlled Ovarian Hyper-Stimulation Protocols; Current Status of GnRH Antagonists in ART; Route of Administration of Gonadotropins and Ovarian Response; The Use of LH in ART Cycles; Induction Protocols of the 200’s using r-hLH and r-hCG; Fine-tuning the Role of GnRH Antagonists in ART Programs