

Clomiphene Citrate (*Clomid, Serophene*)

Clomiphene citrate (*Clomid, Serophene*) is an oral medication used to stimulate ovulation in non-ovulating women. It is also used to enhance the quality of ovulation, to correct luteal phase defects, and to ensure the proper timing of artificial inseminations. Clomiphene citrate acts as an anti-estrogen. It tricks the pituitary gland into producing the hormones that stimulate the ovaries.

The physician determines the dose of clomiphene; up to 50 mg (3 tablets) per day can be taken. The medication can be prescribed days 3 through 7, or 5 through 9 of the menstrual cycle. Ovulation occurs approximately 5 to 8 days after the last tablet is taken. Ovulation may be triggered by an injection of hCG.

Side Effects & Risks

Common side effects of clomiphene citrate include hot flashes, headaches, breast tenderness, nausea, nervousness, visual disturbances, vaginal dryness and ovarian cysts. Clomiphene citrate treatment increases the rate of twin pregnancy approximately 10%. Less than 1% of deliveries are triplets or more.

Certain studies have suggested that clomiphene citrate, after prolonged use may be associated with an increased risk for ovarian cancer. Research in this area is on-going.

Patient Instructions:

1. Schedule an appointment with a member of the staff before you begin your clomiphene treatment cycle to learn how to prepare and administer the hCG injection. You will also need to obtain a prescription for the hCG and sign a consent form.
2. Notify your office on Day 1 (the first day of full flow) or 2 of your menstrual cycle. If this occurs on a weekend or holiday, please call the next business day. You will be told when to begin taking the medication, how much to take, and when to return to the office if your cycle is to be tracked by blood tests and ultrasounds. Monitoring usually begins on Day 9 or 10. Check monitoring hours with your office and make an appointment if necessary. Refer to **Cycle Monitoring**.
3. **You should have a full flow menstrual period or a negative pregnancy test before beginning a clomiphene cycle.** Contact a member of the staff if you are unsure if you have had a full flow.
4. CHR physician review the results of blood tests and ultrasounds daily. If your cycle is being monitored, call the PRN system by 4:00 pm for Results.

5. Your physician **may** order an injection of hCG to trigger ovulation. If so, you will be given a specific time the medication should be administered.
6. Have intercourse every 2-3 days until Day 9 or 10. Then contact your office for instructions. If inseminations are planned, you will be told to schedule 1 or 2. The timing of the procedure(s) will be determined by your physician. Refer to **Intrauterine Insemination** (TP-9-10).
7. Schedule a follow-up appointment if requested by your physician.
8. Call the office when your menstrual period begins after a treatment cycle. The clomiphene citrate dose can be increased in 50 mg increments if ovulation did not occur or if the cycle was inadequate otherwise. A new cycle cannot be started if residual ovarian cysts are present. Patients frequently skip a month before beginning another cycle stimulated by medication.
9. Consult with your physician if you do not conceive after 3 cycles of clomiphene citrate treatment.