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## Complications of ICSI

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Artificial reproductive techniques are currently responsible for 1.7-4% of the births in developed countries and Intracytoplasmic Sperm Injection (ICSI) is the most commonly used, accounting for 70-80% of the cycles performed. Despite being an invaluable tool for infertile couples, the technique bypasses several biological barriers that naturally select the gametes to achieve an optimal embryonic and fetal development. In this perspective, ICSI has been associated with number of complications, ranging from pre-retrieval complications, oocyte retrieval complications, embryo transfer complications, post-transfer complications. In this lecture, we discuss the possible complications of all ICSI steps. For one, many pre-retrieval complications were noticed in our center during preparing our patient to ICSI: Ovarian hyperstimulation, poor ovarian response, down-regulation failure, cyst formation and psychological disturbances, etc. On the other hand, oocyte retrieval complications are the most critical. This step should be conducted by experienced doctor to avoid serious organs and vessels injury. Several situations can cause damage to the embryos during transfer like difficult embryo transfer, endometrial cavity fluid identified during IVF treatment and excessive cervical mucus and retained embryo at embryo transfer. Abortions, ectopic pregnancy, multiple pregnancy, pelvic infection, ovarian torsion are not uncommon post-transfer complications. Our center experience in early diagnosis and management of the whole procedure complications will be presented.

## Biography

Ahmed Raafat Ibrahim Mashaly is currently working as the Consultant in Obstetrics and Gynecology in Dammanhour National Medical Institute, Egypt. He also served as IVF and ICSI Consultant and Clinical Director of Ryada Fertility Center in Dammanhour, Egypt. He had also served as a Specialist Doctor in Obstetrics and Gynecology in Dammanhour National Medical Institute and as Resident Doctor of Obstetrics and Gynecology in Dammanhour National Medical Institute. He has completed a Clinical Attachment in Obstetrics and Gynaecology Department, Burnley General Hospital, UK. He was also a Visitor Resident Doctor, Obstetrics and Gynecology in Shatby Maternity University Hospital. His area of interest includes applying protocols of induction for ovulation and superovulation, oocyte retrieval, laboratory work of ICSI, Embryo Transfer (ET) and giving the luteal phase support and fetal reduction.

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