

THIS INFORMATION IS PROVIDED FOR OUR PATIENTS ONLY

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MOCK CYCLE

A MOCK cycle is an artificial cycle of hormonal stimulation effect on the *endometrium*, lining of the uterus where the embryos implant. Because the receptiveness of the *endometrium* is so critical to the success of a pregnancy, I recommend a MOCK cycle. It usually is performed the cycle immediately preceding the one during which embryo transfer is contemplated.

During this cycle, the patient will receive Lupron subcutaneously to prevent the brain from causing extra hormonal release from the ovaries. Because the ovaries secrete different amounts of estrogen and progesterone depending on which day of the cycle a patient is on, by controlling the ovaries output of hormone, the *endometrium* only responds to the medications you are given. Ultrasounds are performed to assess the response or thickness of your mock cycle *endometrium*. During the late part of the cycle, called the luteal phase that responds to the addition of progesterone, an endometrial biopsy, taking a sample of the lining of your *endometrium* will be performed to determine whether the endometrial lining was appropriately in-phase in response to the medication regimen.

If the biopsy of the lining shows the patient to have responded appropriately to her given hormonal support, then the following cycle becomes the actual cycle wherein the embryos are implanted into the uterine cavity at a specified time. If however, the biopsy shows an inadequate response to the medications given to prime the *endometrium*, medication changes will be made and a second MOCK cycle will follow. This procedure is continued until the right combination of medication that stimulates the appropriate endometrial response is found in order to give you the best chance of becoming pregnant during your embryo transfer cycle.

If you have any questions regarding MOCK cycles, please do not hesitate to contact Fatima, our IVF nurse.

Thank you.

Robert B. McWilliams, M.D.

