部份照片：受访者提供

林韵璇 X Natasha Ain: 战友相伴不孤独

友情交叉点

林韵璇：
“Natasha的陪伴对我而言是心灵鸡汤，确实陪我度过了许多洒泪和欢笑的时刻。”

Natasha Ain：
“一起经历了二十几年的大小事情，我们更像是处在同一条船的战友，互相借力和激励彼此游到终点。”

Photography/Eric Chow@Blink Studio
Styling/Bosco@bostyle.co
Hairdo/Kay@Centro Hair Saloon
Make up/Backstage Academy
Outfits/TORY BURCH 图腾拼接长裙（左：林韵璇）
不规则黑白网纱拼接上衣、高腰长裙（右：Natasha Ain）
Text/Rachel

在政府医院那长长的走廊上，排满了为等候的人特设的椅子，可是此刻医院却不是车水马龙的时刻，一位看起来像是医务人员的女生坐在长板凳上思考，此时另一位女生穿过长长的走廊，望了几扇门，最后停在相同的地方，两人四目相投，她犹豫三秒钟后坐了下来。两位女生年龄相仿，看起来像是二十六七岁的姑娘，外表打扮干净俐落，年轻貌美，笑起来甜美同时散发着慧根气质，其中一位先开口问好，两人开始徐徐而谈。

啊，以上这一幕像极了大家爱看的韩剧：有壮观场景、年轻貌美的姑娘和一个即将要发展成长达十几集的故事—— 不过这不是一个爱情故事，而是一个感动人心的友情故事，场景纯属虚构，但是不打不相识的故事却是如此开始。

不打不相识的开始

说是不打不相识可能过于严重，两人从一开始就和睦相处，只是处在竞争的立场。这是一个关于本地知名妇科与助孕专科医生兼作家林韵璇医生，与20年的挚友Natasha Ain医生的故事。

“我们确实是在医院相识。2001年，我们两人恰好同时在马大医院竞争着同一个职位而相识，一开始我们并不知道彼此是直接的对手，单纯认为同辈一起应征，大家都是医界新人，聊得来就开始了这段至今的友谊。多年后才从前辈们口中知道，当时的空缺其实只有一个，但是团队非常喜欢我们两人，也看到了我们各自的长处，无法割舍之下创出了另一个相同的职位，让我们两人一起入职。当年的同事都笑说万万没料到我们两人可以成为好朋友，更相互扶持至今。”林韵璇医生笑着说。

“是的，我知道后感觉不可思议，但是要感激当年前辈对我们的提拔，看中我们的能力，更重要的是它开始了我们两人的缘分，若没有这份工作，我们就无法一起共事，慢慢建立起彼此的友谊，当年还一起到英国攻读我们的专科学位；我记得当时主管说你们就一前一后去进修吧，可是我们却希望可以同步学习，所以争取一起前行，当中有太多的故事，我感恩遇见Helena，有这一段缘分。”

为不孕不育专科献力

Helena林韵璇医生是一位妇科与助孕专科医生兼作家，还是三个小孩的妈妈。她于1999年取得医生资格，2006年在英国获得专科学位，并于同年完成妇产科硕士学位；2018年，Helena博士被英国皇家妇产科学院(FRCOG)提升为院士。Natasha Ain 医生同样是一名妇科及助孕专科医生，和Helena林韵璇医生一同在英国获得专业学位，并在UKM获得妇科硕士学位，不孕不育课题是她的专科。

两位医生都是妇产科顾问，对生育课题和研究特别感兴趣，在谈及不孕不育课题有说不完的经验谈。

“因为父母工作和成长的关系，我自小接触关于人体细胞和科学研究，对此课题特别有兴趣，或许潜意识让我走上这个专科的原因。不孕不育课题这二十年来开始获得更广泛的讨论和被接受，我认为科学若能够让人心想事成，实在是一件好事，对于我的专业能够做到这一点，尤其是看到当初的尝试，父母亲为了想要生儿育女的付出，到如今孩子们逐渐长大，它依然让我感动。二十年前，不孕不育这个专科是以男医生和研究人员居多，我们属于少数走上这条道路的女医生，但是非常幸运的，我们有愿意分享知识、给予鼓励和提拔我们的前辈。”

Natasha Ain医生则是以过来人身份分享着旅程：“当年我在想着要专攻哪一个专科时，恰好遇到自己不孕的情况，虽然最后是因为兴趣而选择了不孕不育科，但是因为本身情况而推使自己做此选择的成分非常大，确实想再深入研究不孕不育的原因，科学能够如何帮助我们等等课题。”

同样主攻不孕专科，她们互相优化对方的能力，两人各自带入不同的功夫，以达到事半功倍的效果。

Helena(右)与Natasha的情谊始于‘竞争’，却以‘扶持’走下去。

她们不只是事业上的战友，也是生活上的伙伴。

林韵璇医生说：“只有战友才会明白我们经历的一切。”

互相尊重的洁癖狂

难道两人从未想过要以任何手段赢过对方？毕竟是同一个职位，同一个专科，如今更在同一间医务所，众人皆知专科竞争度高，这可不是假想敌，而是真的对手啊！

“我想我们是彼此欣赏，同时清楚看到对方的能力并折服于此。我从没有想过手段，因为无需如此，反而若我们懂得优化对方的能力，两人各自带入不同的功夫，这不是更事半功倍吗？对于Natasha，我非常折服于她的执行能力，对于每一件需要完成的事情她不曾让我担心，处女座的她内心洁癖，细心、超强责任心和高执行能力是她的优点，让我佩服。”

“或许是从一开始，我们两人心中就不存在所谓的竞争，一路走下来，时而懵懵懂懂，时而努力前进，很多时候只有我们两人能彼此依靠，忙着出国深造和努力奠下事业基础，一起经历了二十几年的大小事情，两人更像是处在同一条船的战友，互相借力和激励彼此游到终点，这点更为重要。Helena说我洁癖，其实啊，我们都是洁癖狂，She is an OCD too! 只是我们坚持洁癖的事情不一样，所以才相安无事，彼此配合，同时体恤对方。哈哈！”

遇见一个洁癖狂不难，难得是遇见一个和自己相辅相成且能够互相尊重的洁癖狂！

只有战友才会明白

人生漫漫长征路中，同行者中有战友也有挑战者，有实际存在的，也有精神上的；是他们装扮了你的人生。

“身为职业女性，尤其是专业医生或类似的行业，我们需要的付出和牺牲的事情非常多，例如和孩子的相处时间，和父母家人的陪伴，或是其它一些兴趣等等，你需要异于旁人的努力、坚持和牺牲。唯有和你一样处在同一个情况下的战友才能明白你的孤独和难过，Natasha的陪伴对我而言是心灵鸡汤，确实陪我度过了许多洒泪和欢笑的时刻，当一个人撑不下去时，彼此的相伴就成了很重要的依靠，让我们歇息再一起前进，正因为这些陪伴，使我变得坚强和充满活力，所以，她怎么会是假想敌呢？”

“我想友情啊，重要的是互相尊重，懂得对方的优点缺点，更要懂得你不能要求对方改变，因为你的看法并非对方的想法，身为朋友需要明白相伴大于改变对方。我觉得缘分这件事非常奥妙，这一串的机缘，从工作到生活，像是陪伴着她走过不孕不育的过程，与其说我付出，其实它让我能懂的怜悯之心，能更体恤来求医的大众，是另一种成长，我确实感恩。” 林韵璇医生说道。

《三国志·蜀志·关羽传》：“孟起兼资文武，雄烈过人，一世之杰，黥彭之徒，当与益德并驱争先，犹未及髯之绝伦逸群也。”能拥有在思想、慧根、能力、兴趣和个性上相近的战友实在是人生一大幸事，与其将对方视为敌人，Helena医生和Natasha医生懂得好好把握并驱前进，不枉费了上天给予的这份机缘。

NO KEEPING MUM

While infertility and conception issues have been around for ages, it has remained a topic that society keeps hush-hush and to a certain extent, treats as taboo. Three brave and inspiring mothers have come together in a tell-all with ***Kathlyn D'Souza,*** *about how they initially struggled to conceive and eventually resorted to In Vitro Fertilisation*

Photography **BRIAN FANG/M8 STUDIO**
Styling **ANDREA KEE,** assisted by **SARAH HAMZAH**
Art Direction **LIEW CHIAW CHING**

Motherhood. A beautiful idea, and even more beautiful journey—for most. Many women consider it a life goal. It could be the one thing in their life that could warrant both the feeling and acknowledgement of 'having finally made it.' Nobody is to be blamed; movies and dramas romanticise the nine-month period of carrying a baby, to the hour of labour and finally giving birth. Plus, it is embedded in our DNA, to want to reproduce and therefore, it only seems natural for women to desire motherhood. For some, like *Dr Natasha Nor, Kim Raymond and Nurul Zulkifli* however, things were not as easy as it seemed, as all had gone through harrowing experiences to finally be able to hold their bundles of joy in their arms. It was hard for them to conceive and even harder still to keep trying, but they never stopped until hope came... in the form of IVF.

DOCTOR'S ORDERS
Being a doctor in the field herself, Dr Natasha urges couples struggling to conceive to seek treatment as soon as they can

Dr Natasha Nor

As an obstetrician and gynaecologist at KL Fertility Clinic herself, Dr Natasha Mohd Nor focuses on assisting couples conceive. As a self-proclaimed 'baby maker', she says modern technologies such as IVF has helped a lot of couples facing fertility problems to conceive and start their own family. She, too, was no exception. "As a matter of fact, I myself am an IVF success story. I had my own treacherous path to fertility that I struggled with, and required multiple IVF treatments to conceive," she confided. "But now I am a proud mother to a pair of twins."

Like most women, she dreamt of having her own family—first by being a wife, and then a mother. After she had married and settled down for a year, she felt that she should start planning to have a baby. "For some weird reason, I somehow had an instinct that I would eventually become a mother to twins," she said pensively. "It's just that I never anticipated that it would be one of the biggest challenges of my life." However, faith, instinct and the unwavering support from her family kept her going all those years during her fertility journey.

One year into her marriage, Natasha still found herself unable to get pregnant. Nevertheless, being a doctor in the related field does give one extra knowledge to move along in the right direction. After exploring other possible options, IVF was eventually chosen as the best one—based on the outcome of the fertility tests she had taken.

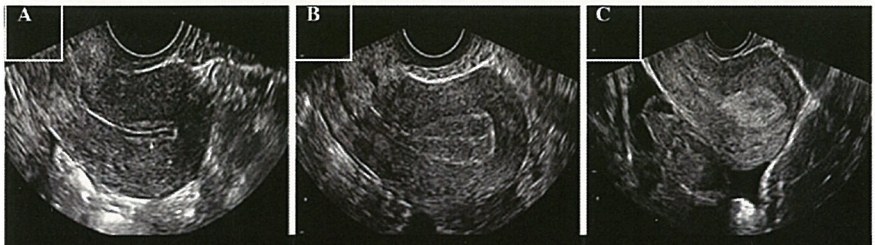
"Of course, I remember the countless hormonal injections, which luckily did not pose any side effects to me," she shared. "But I'm reminded of it as I treat my patients day in and out. I'm also more empathetic towards them because I've been through it all myself."

Describing it as being 'on a roller coaster of emotions,' Natasha says that IVF treatments have a way of making you feel high and low. Highest is, of course, being told that one is finally pregnant following a test. And the lowest? For her, it was the process failing her for the third time. Nevertheless, she persevered and finally, gave birth to a delightfully cheeky pair of twins, Naim and Zara, who, fortunately and unfortunately, pick up after her and her husband—both the good and bad qualities, she remarked with a laugh. "But I feel blessed every day when I see my children," she added. "If people were to ask what my biggest success in life is, I'd say going through the hard journey of infertility and still managing to come out at the end of it in one piece, and as a mother at last."

We discussed the issue of how women and couples find it hard to speak about infertility problems, mainly out of fear of being shamed. To this, Natasha responded fervently, "Infertility has always been a taboo subject not only among Asians but also Western societies. Women have always been taught that it is our fault and should feel ashamed about it. My message to those having fertility issues is this: do not be afraid of seeking the right help from fertility doctors and do not delay the necessary treatments as the success rates of pregnancies tend to drop as women age."

And for those who still are unable to conceive, and have exhausted their options? The doctor has sound advice. "You do not need to be a biological mother to love a child, and it takes more than blood relations to raise happy and responsible children," she shared. "It doesn't make you less of a 'real' mother, and don't let anyone tell you otherwise!"

KIDDING AROUND
The photo shoot was filled with lots of laughter and joy as the children and mothers were captured in the most adorable, candid moments together



Trilaminar endometrial lining adalah corak A yang kelihatan pada gambar rajah di atas. Kajian menunjukkan kadar kejayaan IVF adalah lebih tinggi di kalangan wanita yang mempunyai corak *trilaminar endometrial lining* tersebut pada hari di mana suntikan HCG dilakukan.[2]

Trilaminar endometrial lining

Seperti yang kelihatan di dalam gambar rajah di bawah yang menunjukkan tiga corak lapisan endometrium:[1]

A. Kelihatan dengan jelas 3 garisan yang terang *(hyperechogenic lines)*. Ini dinamakan sebagai *trilaminar* endometrium.

B. Lapisan tengah-tengah yang merupakan rongga rahim *(uterine cavity)* tidak kelihatan jelas berbanding dengan corak A.

C. Endometrium corak C pula garisan tengah iaitu rongga rahim langsung tidak kelihatan.

Endometrial lining yang tebal

Di samping corak *endometrial lining* yang *trilaminar*, ketebalan *endometrial lining* juga mungkin memainkan peranan penting untuk membolehkan implantasi dan kadar kejayaan yang elok selepas rawatan IVF. Kajian yang dijalankan oleh Maged et al menunjukkan ketebalan dinding rahim 10-12.9mm dan mempunyai corak *trilaminar* mempunyai kadar kehamilan yang paling baik.[3] Kebanyakan kajian telah menunjukkan ketebalan dinding rahim hendaklah sekurang-kurangnya 7mm ke atas untuk mendapat kehamilan.

Endometrial lining yang mempunyai aliran darah yang elok

Aliran darah yang mengalir di dalam rahim juga dikatakan boleh mempengaruhi kadar kejayaan rawatan IVF.

ERA *(Endometrial Receptivity Analysis)*

Ini adalah sejenis ujian yang boleh dilakukan untuk mengetahui sama ada *endometrial lining* seseorang wanita itu adalah sesuai untuk implantasi embrio. Ujian ini mungkin adalah sesuai bagi wanita yang mempunyai masalah *recurrent implantation failure*. Biopsi lapisan dinding rahim dan kajian sampel biopsi tersebut akan dibuat di makmal. Prosedur ini akan dilakukan satu kitaran sebelum pemindahan embrio akan dilakukan bagi menentukan bilakah waktu yang sesuai untuk melakukan prosedur *embrio transfer* (ET).

Langkah-langkah yang boleh diambil untuk mempunyai *endometrial lining* yang optimum

1. Pengambilan nutrisi dan diet yang sihat
2. Senaman
3. Vitamin D
4. Akupuntur
5. *Frozen Embryo Transfer*

Masih banyak penyelidikan kini sedang aktif dijalankan untuk mengkaji interaksi antara embrio-endometrium. Diharapkan kajian tersebut dapat membongkarkan rahsia yang lebih mendalam pada masa terdekat mengenai *receptivity endometrial lining* agar kadar kejayaan rawatan IVF dapat dipertingkatkan lagi.

Sumber:

1. Fei Gong, et al. A Modified ultra-long pituitary downregulation protocol improved endometrial receptivity and clinical outcome for infertile patients with polycystic ovarian syndrome. Experimental and Therapeutic Medicine (2015): 1865-1870

2. Jing Zhao, et al. Endometrial Pattern, Thickness and Growth in Predicting pregnancy Outcome in following 3319 IVF Cycle. Reproductive Biomedicine Online. (Dec 2014);Volume 9, Issue 3 :291 – 298

3. Maged Al Mohammady, Ghada Abdel Fattah, et al. The impact of combined endometrial thickness and pattern on the success of intracytoplasmic sperm injection (ICSI) cycles. Middle East Fertility Society Journal. (2013);Vol 13 (Issue 3): 165 -170

Dr. Natasha Ain Mohd Nor merupakan Pakar Obstetrik dan Ginekologi (Infertility) dari KL Fertility Centre. Dr. Natasha juga mengelolakan program IVFku bagi membantu pasangan yang ingin menjalani rawatan IVF pada harga yang berpatutan. Beliau aktif menulis dan berkongsi informasi di blognya, www.drnatashanorfertility.com

Our Experts

NUTRITION

Celeste Lau Wai Hong

BSc (Hons) Nutrition, MD Nutrition and Dietetics (Aus)

A member of Malaysian Dietitians' Association (MDA) as well as Parenteral and Enteral Nutrition Society of Malaysia (PENSMA), Celeste received her credential in dietetics from Australia. She is currently the head of department in dietetics and nutrition services at Sunway Medical Centre, where she leads both clinical and community-based nutritional wellness. She conducts talks and workshops, and is an active contributor in several health magazines. Her special interests are in children's health and critical care. Celeste is a mother of two.

CHILD PSYCHOLOGY

Jessie Foo Xiang Yi

A trained clinical psychologist and a member of Malaysian Society of Clinical Psychology. Jessie graduated with a Masters in Clinical Psychology from HELP University, Malaysia and conducts Cognitive Behavioral Therapy (CBT) to enhance adolescents' and adults' ability to cope with psychological distress and live a meaningful and hopeful life. She uses play and art techniques to engage with children. Jessie performs psychological assessments on children to diagnose and determine psychological, social, behavioral and educational functioning.

Early Childhood Education

Daisy Ng

Daisy is a mother of two and Founder of Trinity Kids Malaysia. A dedicated practitioner in early childhood education, she has been featured on BFM, The Edge, NTV7, The Star and given talks on related topics. As a certified Dr Sears Health Coach in children/family nutrition and ante-natal wellness, Daisy actively promotes a wholesome and non-processed diet in Malaysia's schools. An avid reader and writer from a young age, she now writes about topics in early childhood education, child development and nutrition.

CONSULTANT PAEDIATRICIAN AND NEONATOLOGIST

Dr. Khoo Boo Aik

MD (UKM), MRCPCH (UK), AM (MAL).

Dr Khoo is a consultant paediatrician and neonatologist at Sunway Medical Centre. He completed his medical degree from National University of Malaysia (MD-UKM) in 1997. He obtained his paediatric postgraduate membership from royal college of paediatric and child health (MRCPCH) in Glasgow, UK in 2003. He continued his neonatal subspecialty fellowship training in 2005 at Liverpool Hospital and the Royal Hospital for Women (RHW), Sydney, NSW, Australia. In 2009, he was accredited as consultant paediatrician and neonatologist under the National Specialist Register (NSR), Malaysia. Currently, he also holds a part time lecturer post at Jeffrey Cheah School of Medicine and Health Sciences, Monash University, Sunway Campus. He is a father of 3 energetic boys aged eleven, nine and five.

DIET & NUTRITION

Ng Yee Voon

BSc Dietetics (USA), MSc Nutrition (USA), Registered Dietitian (USA), Member of Malaysian Dietitians' Association (MDA)

A Master of Science in Nutrition from Texas A&M University and a Registered Dietitian in the US, Ng Yee Voon gained her experience in general nutrition with a focus on kidney disease in the States. She is currently a senior dietitian at Sunway Medical Centre providing medical nutrition services for inpatients and outpatients, especially for children and their care providers. She's the leading therapist for the "Feeding Group Therapy" for children with feeding difficulties.

Yee Voon is a panelist for several local magazines for moms and babies and a speaker for the Parentcraft programme in the hospital. She is also a member of Academy of Nutrition and Dietetics U.S.A and council member of the Malaysians' Dietitians Association.

Fertility Expert

Dr. Natasha Ain Mohd Nor

Bsci.MBBS (UNSW Sydney) MRCOG (UK) MOG (UKM)(UKM), MRCOG (London)

Dr Natasha Ain studied at University of New South Wales, Sydney and found her passion in the field of fertility. A mum to a pair of twins, she obtained her degree and served in the United Kingdom before returning to Malaysia to obtain her Bachelor's Degree at the Universiti Kebangsaan Malaysia (UKM), Bangi. The former lecturer of Obstetrics & Gynecology at the Universiti Kebangsaan Hospital Malaysia is passionate in helping couples who have trouble conceiving. She is also active in penning her advice on fertility in her blog: *drnatashanorfertility.com*.

Celeste Lau Wai Hong
NUTRITION

VITAMIN A, C, D REQUIREMENT FOR CHILDREN			
BOYS & GIRLS			
	Vitamin A	Vitamin C	Vitamin D
1-3 years old	400µg	30mg	5µg
4-6 years old	450µg	30mg	5µg
7-9 years old	500µg	35mg	5µg

Source: Recommended Nutrient Intakes For Malaysia 2005

"I would like to inquire about the issue of vitamin deficiency, especially in children. I do not allow my three year old to spend a lot of time under the sun due to skin cancer concerns, but I make sure he takes a multi-vitamin which contains Vitamin D, daily. Will that effectively prevent a deficiency?"

Vitamin deficiencies seldom happen in children unless the child is picky in his/her food choices. Foods nowadays are fortified with vitamins & mineral. Besides getting the vitamins and minerals from fruits and vegetables, it's also found in bread, milk, biscuits, cereals and beans/ nuts. eg. You can find the content of the energy, nutrients, vitamins and mineral listed in the food label.

Sunshine is one way of obtaining Vitamin D which is free for everyone. Exposing the child to some sunshine not only allows the formation of vitamin D, but the child also gets to enjoy the outdoors, play games, sweat and get up close to Mother nature.

Dr. Natasha Ain Mohd Nor
FERTILITY EXPERT

"Is it safe to consume commercial multivitamins for my general health when I'm trying for a baby? I am concerned about my advancing age (I am 33 and my husband is 34) and the fact that my hubby and I are both vegetarians."

Yes, it is safe to consume commercial multivitamins for your general health. However, if you are keen to conceive there are several specific vitamins you should take in order to enhance your fertility and prepare your body for pregnancy. Hence, you could instead buy prenatal multivitamin which usually contains more folic acid and iron. The following vitamin and supplements are important:

- **Folic acid.** This is a very important supplement to be taken by all women trying to conceive. It is a vitamin B9 which is used by the body to create red blood cells. The dosage required is a minimum of 400-600mcg daily to increase the quality of your eggs and reduce the risk of your baby having a neural tube defect, to about 70%. This is an abnormality of the brain, spine or spinal cord which could cause your baby to be born with severe mental and physical disabilities.
- **Iron.** This is very important for you and your partner since both of you are vegetarians. Iron is important for creating red blood cells. In addition, it is vital for your baby's growth and development. You may need to take at least 27mg daily.
- **Calcium.** Important for you and your baby's teeth, bones, heart and muscles. Any deficiency in Calcium during pregnancy, your body will withdraw it from your bones, which causes them to be less denser and prone to osteoporosis. A 1000-1500mg daily intake of calcium is recommended.
- **Fish oil.** This contains Omega 3 Fatty acid which is vital for regulating healthy reproductive hormones and producing good quality egg and sperm. In addition, studies have shown that mothers who consume fish oil have babies with better cognitive development and vision. A minimum dosage of 1000mg / day is recommended. The fish oil supplement should at least contain 200mg of DHA and 220mg of EPA.
- **Coenzyme Q10.** For those having issues with fertility, taking this additional supplement might actually help boost the quality of egg and sperm. Recommended dosage is 100-120mg daily.

For your husband, there are supplements that he could also take to boost his health as well as his fertility. On top of multivitamins, he could also take zinc, coenzyme Q10, vitamin C and E.

In addition to taking all those supplements mentioned before, you should opt to have a balanced and healthy diet. Increase your intake of whole grains, fruits, vegetables, legumes and fish with moderate intake of proteins and iron fortified food. Reduce intake of sugar and highly processed food.

All the best of luck and here's blowing some baby dust over to you!

Celeste Lau Wai Hong
NUTRITION

VITAMIN A, C, D REQUIREMENT FOR CHILDREN			
BOYS & GIRLS			
	Vitamin A	Vitamin C	Vitamin D
1-3 years old	400µg	30mg	5µg
4-6 years old	450µg	30mg	5µg
7-9 years old	500µg	35mg	5µg

Source: Recommended Nutrient Intakes For Malaysia 2005

"I would like to inquire about the issue of vitamin deficiency, especially in children. I do not allow my three year old to spend a lot of time under the sun due to skin cancer concerns, but I make sure he takes a multi-vitamin which contains Vitamin D, daily. Will that effectively prevent a deficiency?"

Vitamin deficiencies seldom happen in children unless the child is picky in his/her food choices. Foods nowadays are fortified with vitamins & mineral. Besides getting the vitamins and minerals from fruits and vegetables, it's also found in bread, milk, biscuits, cereals and beans/ nuts. eg. You can find the content of the energy, nutrients, vitamins and mineral listed in the food label.

Sunshine is one way of obtaining Vitamin D which is free for everyone. Exposing the child to some sunshine not only allows the formation of vitamin D, but the child also gets to enjoy the outdoors, play games, sweat and get up close to Mother nature.

Dr. Natasha Ain Mohd Nor
FERTILITY EXPERT

"Is it safe to consume commercial multivitamins for my general health when I'm trying for a baby? I am concerned about my advancing age (I am 33 and my husband is 34) and the fact that my hubby and I are both vegetarians."

Yes, it is safe to consume commercial multivitamins for your general health. However, if you are keen to conceive there are several specific vitamins you should take in order to enhance your fertility and prepare your body for pregnancy. Hence, you could instead buy prenatal multivitamin which usually contains more folic acid and iron. The following vitamin and supplements are important:

- **Folic acid.** This is a very important supplement to be taken by all women trying to conceive. It is a vitamin B9 which is used by the body to create red blood cells. The dosage required is a minimum of 400-600mcg daily to increase the quality of your eggs and reduce the risk of your baby having a neural tube defect, to about 70%. This is an abnormality of the brain, spine or spinal cord which could cause your baby to be born with severe mental and physical disabilities.
- **Iron.** This is very important for you and your partner since both of you are vegetarians. Iron is important for creating red blood cells. In addition, it is vital for your baby's growth and development. You may need to take at least 27mg daily.
- **Calcium.** Important for you and your baby's teeth, bones, heart and muscles. Any deficiency in Calcium during pregnancy, your body will withdraw it from your bones, which causes them to be less denser and prone to osteoporosis. A 1000-1500mg daily intake of calcium is recommended.
- **Fish oil.** This contains Omega 3 Fatty acid which is vital for regulating healthy reproductive hormones and producing good quality egg and sperm. In addition, studies have shown that mothers who consume fish oil have babies with better cognitive development and vision. A minimum dosage of 1000mg / day is recommended. The fish oil supplement should at least contain 200mg of DHA and 220mg of EPA.
- **Coenzyme Q10.** For those having issues with fertility, taking this additional supplement might actually help boost the quality of egg and sperm. Recommended dosage is 100-120mg daily.

For your husband, there are supplements that he could also take to boost his health as well as his fertility. On top of multivitamins, he could also take zinc, coenzyme Q10, vitamin C and E.

In addition to taking all those supplements mentioned before, you should opt to have a balanced and healthy diet. Increase your intake of whole grains, fruits, vegetables, legumes and fish with moderate intake of proteins and iron fortified food. Reduce intake of sugar and highly processed food.

All the best of luck and here's blowing some baby dust over to you!

CONTEMPLATING IVF?

It's often the last hope for couples wishing to start a family. **Carmen Chow** spoke to two fertility specialists to get the facts straight.

THE EXPERTS

***Dr Helena Lim**, fertility specialist at KL Fertility*

***Dr Natasha Ain**, fertility specialist at KL Fertility*

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More than five million babies have been born worldwide with the help of assisted reproductive technologies since the first in vitro fertilisation (IVF) baby was born in 1978, according to the European Society of Human Reproduction and Embryology (ESHRE). In a nutshell, IVF Is a procedure which helps couples who are unable to conceive naturally. Firstly, hormone injections are used to stimulate a woman's ovaries to produce more eggs, which are then removed from her body. Sperm is collected from her partner and the eggs are fertilised in a laboratory. The embryos are then transferred back to the uterus in hopes that one will implant successfully. The whole procedure generally takes 12 to 18 days per cycle. We spoke to Dr Helena Lim and Dr Natasha Ain from KL Fertility about what's good to know if you're considering this option.

• SUCCESS RATES ARE DEFINITELY HIGHER TODAY

The success rates of IVF today are definitely much better compared to its sensational debut in 1978. From a dismal 6 per cent per initiated cycle, it went up to 23 to 30 per cent in the early 80s and, today, depending on the woman's age, it could reach as high as 50 to 60 per cent.

• BUT IT IS NOT 100 PER CENT SUCCESSFUL

IVF is not the magic bullet the general public perceives it to be. Some women will delay motherhood for career purposes and decide to finally have IVF when they are 40 or above, with high hopes that they

PHOTOGRAPHY SHUTTERSTOCK

'Muslim women can't freeze eggs'

Fertility expert says doing so for social reasons is legally forbidden

KUALA LUMPUR: Muslim women in Malaysia are forbidden to freeze their eggs before marriage.

Syariah law only allows a woman's eggs to be fertilised by her husband's sperm.

Thus, freezing her eggs for social purposes was not allowed, said fertility expert Dr Natasha Ain Mohd Nor.

"A fatwa has been established for Muslim women, where freezing their eggs before marriage is not permissible.

"However, after marriage, they can freeze their eggs provided these are fertilised by the sperm of the husband," she said.

Dr Natasha said egg freezing in Islam was only encouraged if the woman was unable to conceive naturally due to a medical condition, and not when young single women freeze their eggs to become pregnant later on in life.

Dr Natasha, who works at the KL Fertility Centre, said Muslim women who opted to freeze their eggs were usually those with life-threatening illnesses such as cancer.

"Muslim women wishing to freeze their eggs do it for medical purposes. But this is still a very small minority.

"These women are usually undergoing chemotherapy. They are referred by their doctor to a fertility expert to assist them to freeze their eggs as an option should they later decide to have children."

Asked whether there were other reasons for Muslim women seeking to freeze their eggs, Dr Natasha said she had helped freeze the eggs of Muslim women whose husbands could not produce enough sperm.

"What happens is that we freeze the woman's eggs, and then give the husband a day or two to produce the sperm to fertilise them."

Dr Natasha encouraged women in general not to delay pregnancy, saying egg freezing was not a 100% guarantee that they would conceive. – Bernama

Tips menggunakan OPK:

- Cari jenama OPK yang bersifat sensitif dan tepat
- Ada juga OPK digital yang akan memberikan keputusan terus untuk anda. Jadi, tidak perlulah anda menggaru kepala untuk cuba *'interpret'* keputusan sekiranya menggunakan OPK jenis strips.
- Gunakan sampel air kencing dari pukul 10 pagi hingga 8 malam. Jangan gunakan sampel air kencing yang pertama. Juga pastikan mengurangkan meminum air 2 jam sebelum membuat ujian air kencing tersebut agar air kencing tidak menjadi terlalu cair.
- Buat ujian tersebut pada waktu yang sama setiap hari.
- Ambil sampel air kencing.
- Rendamkan *strip* ujian ke dalam air kencing.
- Bacakan keputusan selepas 5 minit.
- Untuk keputusan positif, T line *(Test line)* hendaklah sama terang dengan C line *(Control line)*. (Sekiranya sukar untuk membaca keputusan tersebut, belilah *digital ovulation testing*)
- Kadangkala terdapat sesetengah pesakit di mana keputusannya menunjukkan garisan T line yang samar-samar *('faint positive')*. Sekiranya terdapat keraguan hendaklah mendapat kepastian dari doktor yang merawati terutamanya jika anda sedang menjalani rawatan kesuburan seperti IUI atau untuk prosedur *Frozen embryo transfer.*

Lakukan hubungan seks pada hari pertama mendapat ujian positif OPK dan kemudian, lakukan hubungan seks pada keesokan harinya juga. Walau bagaimanapun, jika anda mempunyai kitaran haid yang tidak teratur, seelok-eloknya hendaklah berjumpa dengan doktor dan pastikan apakah punca haid tidak teratur.

INFO

Di dalam pasaran terdapat juga *fertility monitor* di mana pengguna akan membuat ujian air kencing pada *strip* pada setiap pagi dan meletakkan di dalam alat tersebut. Monitor ini yang akan menganalisa hormon LH dan estrogen di dalam air kencing dan memberitahu sama ada kesuburan anda anda adalah rendah, tinggi atau paling subur *(peak)*. Akan tetapi, harga *fertility monitor* ini adalah agak mahal.

Satu lagi pesanan Dr Tasha, janganlah terlalu taksub dengan alat OPK ini kerana ia mungkin boleh menimbulkan rasa *stress*. Lakukanlah hubungan seks 2-3 kali seminggu. Sekiranya anda sudah boleh mengagak waktu subur, anda bolehlah melakukannya dengan lebih kerap dalam tempoh tersebut.

Dr. Natasha Ain Mohd Nor merupakan Pakar Obstetrik dan Ginekologi (Infertility) dari KL Fertility Centre. Dr. Natasha juga mengelolakan program IVFku bagi membantu pasangan yang ingin menjalani rawatan IVF pada harga yang berpatutan. Beliau aktif menulis dan berkongsi informasi di blognya, www.drnatashanorfertility.com

Jenis-jenis keguguran?

Threatened miscarriage. Diagnosis ini dibuat sekiranya terdapat pendarahan dari faraj, tetapi apabila imbasan *scan* dibuat, jantung janin dapat dilihat di dalam rahim. Pemeriksaan dalaman akan menunjukkan pangkal rahim masih tertutup. Doktor dapat memberikan ubat Duphaston untuk menguatkan rahim dalam kes ini.

Inevitable miscarriage. Diagnosis ini dibuat sekiranya pendarahan banyak dari faraj dan kesakitan perut berlaku, tetapi apabila pangkal rahim diperiksa menunjukkan ianya sudah terbuka.

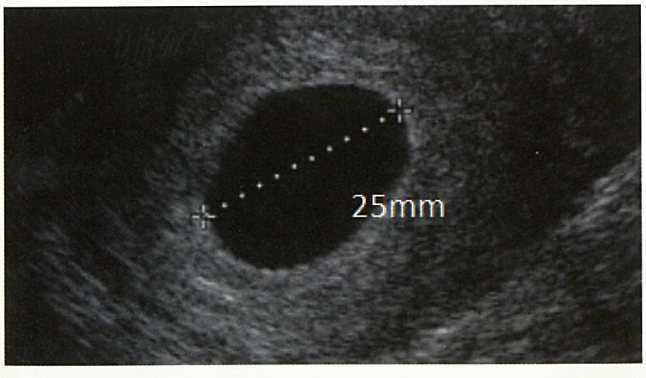
Complete miscarriage. Diagnosis ini dibuat sekiranya pendarahan dari faraj dan kesakitan perut berlaku. Di samping itu, terdapat ketulan darah dan daging / tisu yang keluar. Selepas ketulan darah atau tisu itu keluar, kesakitan dan pendarahan berkurangan. Apabila doktor memeriksa pangkal rahim, ianya sudah tertutup.

Incomplete miscarriage. Diagnosis ini dibuat sekiranya pendarahan dari faraj dan kesakitan perut berlaku. Di samping itu, terdapat ketulan darah dan daging / tisu yang keluar. Apabila doktor memeriksa pangkal rahim, ianya masih terbuka dan masih terdapat daging/ tisu janin di dalam rahim.

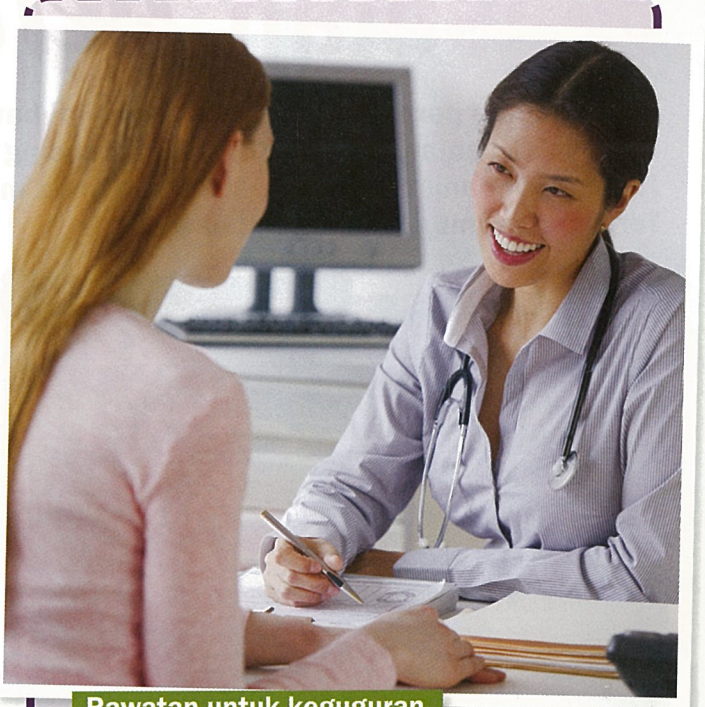
Missed miscarriage. Diagnosis ini selalunya akan dibuat semasa imbasan *scan* dibuat di mana janin dapat dilihat tetapi tiada degupan jantung dapat dikesan. Selalunya degupan jantung janin boleh dikesan pada minggu keenam kehamilan. Kadangkala, saiz kantung tersebut tidak membesar langsung. Wanita tersebut selalunya sama ada tidak mengalami sebarang simptom atau mengalami pendarahan faraj yang sedikit sahaja.

Blighted ovum. Diagnosis ini akan dibuat semasa imbasan *scan* jika hanya kantung sahaja dapat dilihat. Sekiranya kantung bersaiz 20mm, tetapi tiada janin *(fetal echo)* yang dapat dilihat, diagnosis *blighted ovum* akan dibuat oleh doktor. Ini disebabkan oleh pembentukan uri sahaja dan janin tidak pula terbentuk.

Septic miscarriage. Ini berlaku sekiranya terdapat infeksi rahim berlaku pada waktu yang sama dengan keguguran.



Blighted Ovum



Rawatan untuk keguguran

Ini terpulang kepada jenis keguguran yang berlaku. Antara rawatan yang akan diberikan:

- Konservatif. Apabila masanya, janin yang tidak terbentuk normal akan jatuh dengan sendirinya. Oleh itu, boleh menunggu dalam anggaran 2 minggu dahulu
- D&C *(Dilatation & Curettage)*. Pembedahan *minor* di mana pencucian rahim akan dibuat untuk mengeluarkan janin yang tidak terbentuk dengan normal
- *Medical termination*. Sejenis ubat khusus boleh diberikan sama ada melalui faraj atau dimakan yang menyebabkan pangkal rahim akan terbuka dan janin tersebut jatuh keluar

Hendaklah berbincang dengan doktor untuk rawatan yang mana paling sesuai untuk anda. Selepas keguguran, seelok-eloknya hendaklah menunggu selama 3 bulan sebelum mencuba untuk hamil semula.

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4 Tanggapan Negatif Terhadap Rawatan IVF

1. Rawatan IVF adalah mahal

Kos rawatan IVF berbeza dari satu klinik ke klinik yang lain. Ianya adalah dalam lingkungan RM5,000 hingga RM20,000. Kos IVF juga bergantung kepada beberapa faktor termasuklah jumlah ubat rangsangan yang diperlukan oleh pesakit tersebut dan sama ada prosedur tambahan perlu dilakukan.

Bagi pasangan yang bercadang untuk menjalani rawatan IVF, saya sarankan setiap pasangan perlu berbincang dan merancang perbelanjaan untuk pembiayaan kos rawatan ini. Mereka perlu bijak merancang perbelanjaan keluarga dan berjimat-cermat. Sekiranya rawatan IVF mampu memberikan anda sinar baru dalam hidup, usahlah menangguhkannya sehingga umur pasangan wanita meningkat terlalu lanjut.

2. Kadar kejayaan IVF adalah rendah

Untuk pasangan yang mempunyai masalah kesuburan disebabkan pelbagai faktor yang disebutkan, IVF mungkin merupakan solusi yang terbaik. Kadar kejayaan IVF berbeza-beza di antara pusat-pusat fertiliti. Ianya juga banyak bergantung kepada umur pasangan wanita dan faktor ketidaksuburan. Rata-rata kejayaannya adalah dalam lingkungan 35 -50% dan kadang-kala mencecah sehingga 70%. Kadar kejayaan ini adalah besar terutamanya untuk mereka yang sudah sekian lama menanti zuriat.

Pasangan yang menghadapi masalah fertiliti perlu juga membuat persiapan bagi membuat rawatan IVF. Hal ini adalah untuk memastikan kejayaan mereka tinggi. Ramai pasangan yang membuat andaian bahawa rawatan IVF ialah 'the magic bullet' dan mereka tidak membuat sebarang persiapan. Berat badan berlebihan, melengah-lengahkan rawatan sehingga umur sudah meningkat dan pasangan lelaki masih merokok semuanya akan memberi impak negatif terhadap kejayaan IVF.

3. Saluran peranakan yang rosak hanya perlu menjalani pembedahan

Saluran peranakan boleh rosak disebabkan oleh pelbagai faktor terutamanya penyakit endometriosis dan penyakit radang pelvik ('Sexually transmitted disease') dan 'Pelvic inflammatory disease' (PID). PID berpunca daripada gejala sosial yang tidak sihat seperti seks rambang dan kerap bertukar pasangan seks. Ianya juga boleh berjangkit dari lelaki kepada wanita dan sebaliknya. Majoriti pengidapnya tidak mempunyai sebarang simptom-simptom.

Saluran peranakan adalah suatu organ yang sensitif dan halus. Jadi apabila ianya sudah rosak memang agak sukar untuk memperbetulkannya melalui pembedahan. Rata-rata pembedahan untuk membaiki saluran peranakan tersumbat tidak mempunyai kejayaan yang memberangsangkan berbanding dengan rawatan IVF bagi individu tersebut hamil dengan sendirinya pada masa hadapan. Risiko kandungan luar rahim juga adalah lebih tinggi bagi individu tersebut.

Sekiranya pasangan wanita tersebut sudahpun menjalani rawatan untuk memperbaiki saluran peranakan yang rosak dan masih jua tidak hamil bermakna pembedahan tersebut tidak berjaya. Oleh itu, hendaklah membuat perbincangan seterusnya untuk membuat rawatan kesuburan. Rawatan IVF dapat memberikan kadar kejayaan untuk kehamilan yang lebih baik bagi pasangan tersebut.

4. Berkemungkinan mendapat anak yang cacat

Terdapat juga persepsi yang menyatakan bayi yang dilahirkan melalui kaedah rawatan IVF mempunyai risiko untuk kecacatan. Pelbagai kajian yang sudah dijalankan untuk menentukan kesahihan kenyataaan ini. Pada keseluruhannya, kadar bayi abnormal yang dilahirkan adalah sama, sama ada bayi yang terhasil dari persenyawaan normal ataupun IVF. Walaupun demikian, kajian-kajian berterusan masih sedang berjalan untuk memastikan kesihatan bayi yang terhasil dari IVF.

Tahukah anda?

Terdapat beberapa komplikasi yang boleh berlaku selepas rawatan IVF seperti 'ovarian hyperstimulation syndrome' (OHSS), ektopic pregnancy dan kandungan kembar

Kesimpulan

Dalam mengharungi kehidupan yang penuh mencabar ini, individu berlainan akan diuji dengan dugaan yang berbeza-beza. Bagi pasangan yang mengalami masalah kesuburan, diharapkan akan cekal dan meneruskan perjuangan. Janganlah pasrah seandainya rawatan-rawatan kesuburan tidak berjaya pada mulanya. Teruskan mencuba dan tidak berputus asa serta berbincanglah dengan doktor yang merawati anda. Keazaman kadangkala dapat mengatasi segalanya sekiranya diizinkanNya.

Tidak disangkal, kehidupan pada zaman serba moden ini mempunyai liku-likunya yang tersendiri. Inovasi teknologi sains yang moden ini juga memberikan peluang bagi pasangan-pasangan zaman kini untuk mengatasi masalah kesuburan dengan IVF. Oleh itu, kita perlu mengambil peluang keemasan yang ada ini untuk 'embrace' teknologi tersebut. Janganlah mensia-siakan rawatan yang sedia ada ini semata-mata kerana kejahilan diri sendiri.

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