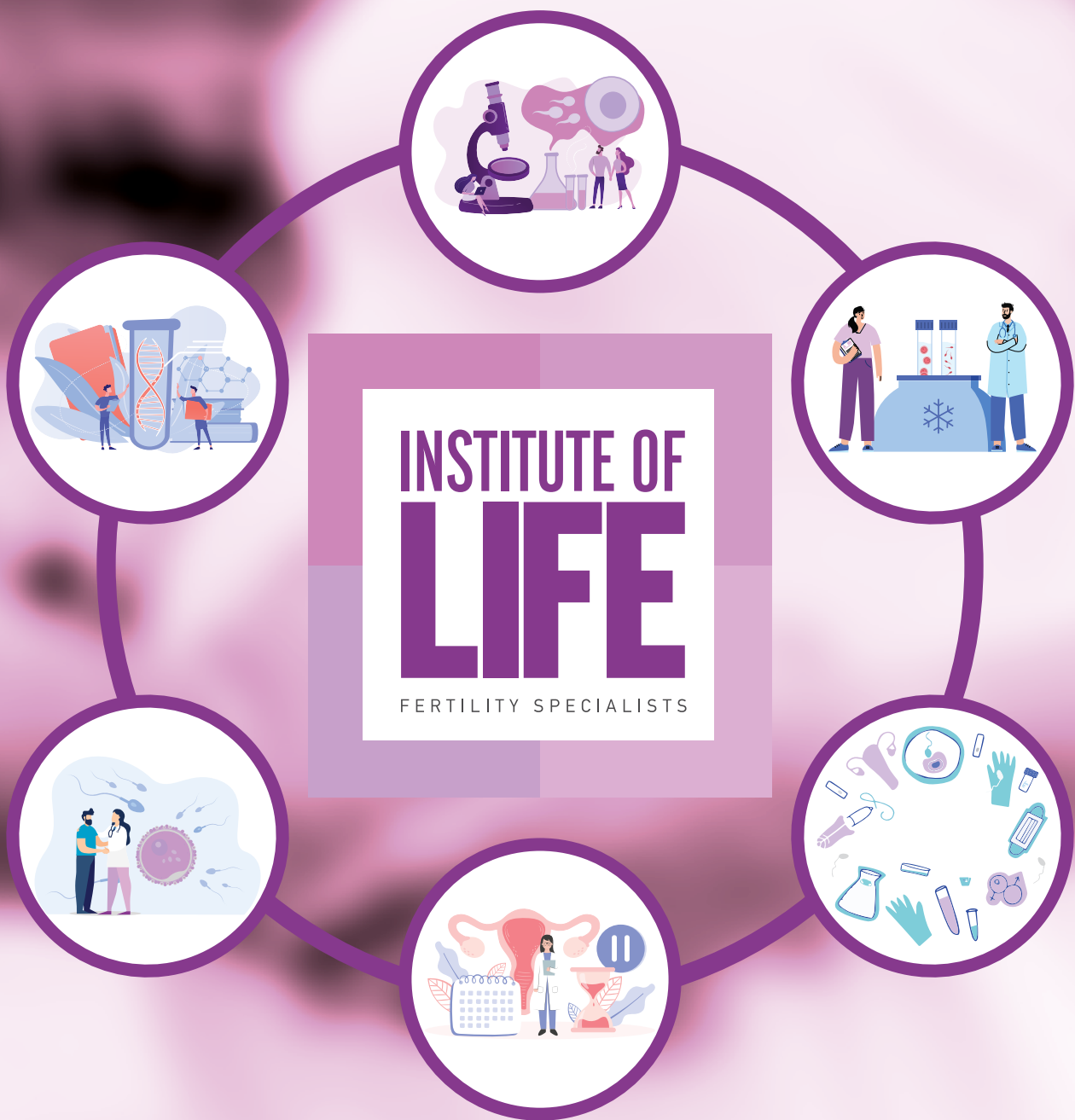




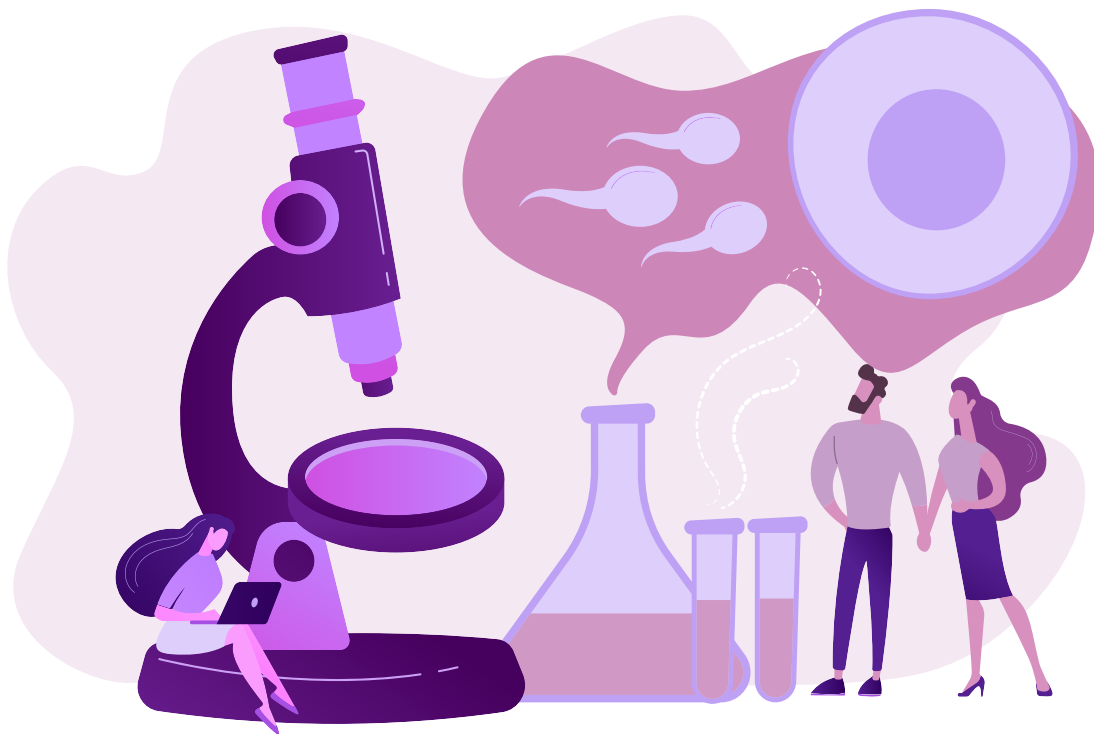
**ALL YOU NEED
TO KNOW**

*We are standing by you every step of the way
to remind you that you are not alone in this dream.*

We are all in this together.



Assisted Reproduction



The IVF process

During in vitro fertilization (IVF), the eggs are fertilized by the sperm in the lab (in vitro) and the embryos that arise are transferred to the endometrium of the prospective mother.

My first visit

We are ready to welcome you as soon as you make an appointment with your treating physician.

Arriving at Reception

As soon as you arrive at Reception, you will be asked to fill out your medical history in a special online platform, following the instructions of the Reception staff.

Meeting with the fertility specialist

During your first visit with your treating physician, you will need to answer questions regarding your detailed medical history and then you will undergo an ultrasound scan. After the initial screening, the doctor will inform you of your choices, so you may get a step closer to your dream.

Required tests

Based on your medical history, you may be asked to undergo further tests, so we may complete your fertility testing. **All required blood tests may be performed within our Unit.** Our Unit staff will update your medical record with the results of your blood tests.

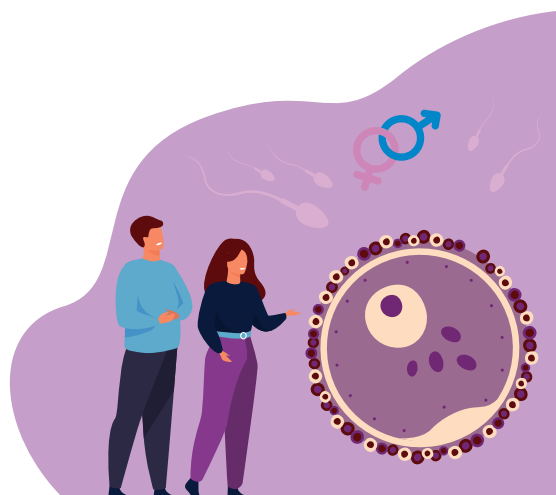
For comprehensive fertility screening, your partner/spouse may also be asked to undergo a semen analysis at our state-of-the-art Andrology Lab.

Don't forget to book your appointment with the Unit Reception* and receive instructions for the tests.

Joining the program

Once you join the IVF program, you will be asked to submit the required supporting documents (see p. 10) for your medical record and fill in the necessary paperwork and consent forms required by law. Remember that **this procedure must be concluded before your egg retrieval!**

Once you join the program, you will receive instructions on how the drugs/injections will be administered by the Unit nursing staff or your treating physician.



*You may contact the Unit Reception
on: +30 210 618 4022 and +30 210 618 4030, Monday-Saturday 08:00–16:00.

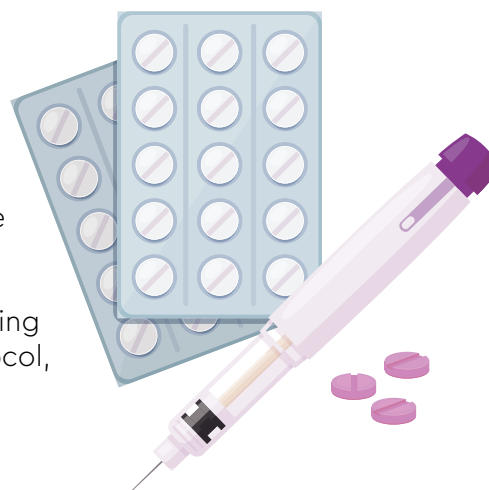
Your step-by-step treatment plan

1

Ovarian Stimulation

As soon as your period starts (day 1- 2 of menstruation), contact your treating physician and book your appointment. During your visit, you will undergo an ultrasound and have your hormone levels measured.

Provided you join the IVF program, your treating physician will determine your stimulation protocol, i.e. the way your ovaries will be stimulated.



What are my choices?

- In the **natural cycle**, you undergo ultrasound and hormonal testing during your cycle, without the administration of drugs. When the dominant ovarian follicle reaches the right size, a chorionic gonadotropin injection is administered and egg retrieval is performed 34–36 hours later.
- In the **semi-natural cycle** (mini IVF), the natural cycle process is followed (i.e. hormonal and ultrasound testing and administration of chorionic gonadotropin), with the only difference being the use of a small quantity of drugs, which are administered to stimulate the ovaries, so they may produce the optimal number of eggs.
- In **ovarian stimulation**, pharmaceutical treatment is administered to stimulate the ovaries, so they may produce more than one egg. Controlled ovarian stimulation is achieved when a stimulation protocol is applied. The protocol is individualized by your treating physician, depending on the case.

You will then be notified of the drugs will be administered (in the form of an injection), while the Unit staff will answer all your possible questions and any queries.

The treatment plan usually runs for 10 to 14 days and includes ultrasound and hormonal testing at regular intervals. Your egg retrieval date will be based on these tests.

We recommend that you eat healthily during the IVF program, restrict your salt and sugar consumption, rest sufficiently, and avoid alcohol and smoking.

Egg Retrieval

Diagram illustrating the process of In Vitro Fertilization (IVF). An egg is being aspirated from the ovary using a needle and placed into a test tube containing sperm.

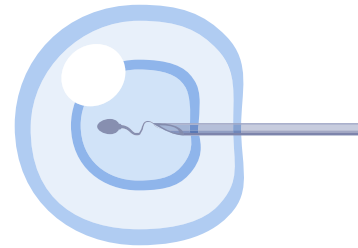
After the egg retrieval is completed, you will be given clear instructions about the pharmaceutical treatment that must be followed, as well as some general guidelines.

On the day of the egg retrieval, you will receive your personal RI WITNESS card with a unique personal code number, which will be used to identify you throughout the IVF cycle and which is exclusively linked to your genetic material (eggs, sperm, embryos). This advanced system operates as an online safeguard, as the samples collected from couples are tracked throughout the assisted reproduction process, eliminating the chance of human error. You must carry the RI WITNESS card with you during any medical procedure you undergo at our Unit.



3

Fertilization



After the egg retrieval procedure, your eggs are placed together with a quantity of sperm, under specific laboratory conditions, so that fertilization may be achieved. Wherever deemed necessary by the embryologists, the eggs are fertilized using the microfertilization (ICSI) method. On the day after the egg retrieval, the embryologists or your treating physician will inform you about the number of your eggs that have been fertilized.

Provided fertilization is achieved, the embryos are cultivated in latest-generation incubators with integrated camera for 24-hour monitoring (**Embryoscope plus, Embryoscope flex and Geri**) and **time-lapse** technology. The Institute of Life – IASO Embryology Lab is the **ONLY** lab in Greece and one of the few in Europe that has the capacity to cultivate simultaneously **ALL** the embryos using the most advanced embryoscopes, which **secure the best success rates** in IVF cycles.

These new advanced embryoscopes ensure ideal conditions for embryo cultivation, as there is no need to transfer them outside the incubator, avoiding any disruption to their cultivation.

This way, embryologists have additional information available for evaluation, more time to process this information and dedicated software that ranks the embryos depending on their implantation potential. Therefore, we can accurately determine **which are the best embryos for transfer**.

Ensuring ideal cultivation conditions **which mimic those of a mother's healthy endometrial environment** as well as taking images using the continuous embryo monitoring cameras provide crucial information about the viability of each embryo separately, which had not been available to date. This improves significantly the possibility of selecting the most suitable embryos by:

The Embryo Ranking Intelligent Classification Algorithm (ERICA) Artificial Intelligence

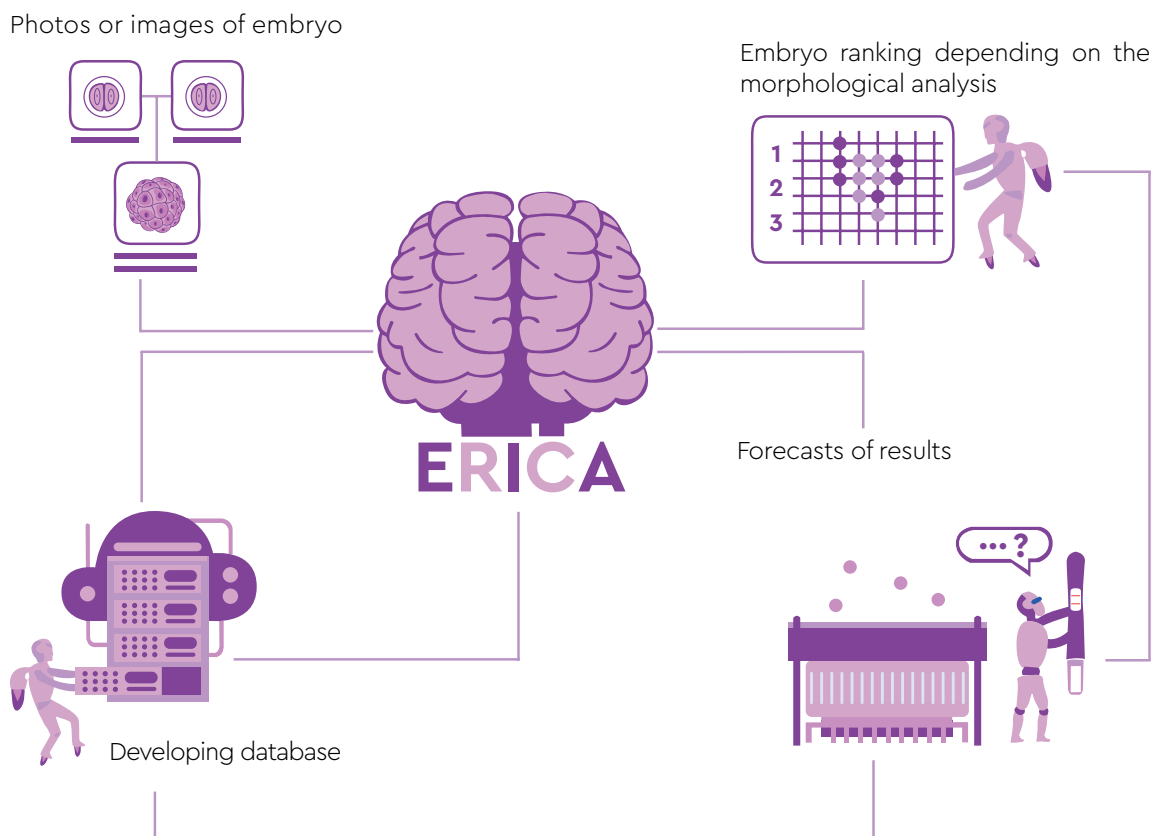
- **Reducing the time required to become pregnant**
- **Reducing the miscarriage rates by 28%**
- **Increasing the birth rates by 41%, which is essentially what we aspire to do and what every woman dreams of!**

Contact the Unit's Reception to find out all about the new My Life Live services, which gives you the option of monitoring live the development of your embryos in the lab.

Embryo Evaluation using the ERICA AI System

(AI) system optimizes the embryo selection process, so as to select the most suitable embryo for transfer. This new prognostic software* ranks the embryos based on their ability to be successfully implanted in the endometrium of the prospective mother, this way increasing her chances of pregnancy. **It is the most advanced AI embryo classification system worldwide and it is applied for the first time in Greece at the Institute of Life – IASO.** By applying the new ERICA system, in combination with conventional selection criteria, we can select the embryo with the highest chance of leading to successful pregnancy, with an accuracy that reaches **92.5%**.

Ask your treating physician about applying the ERICA AI system to your embryos.

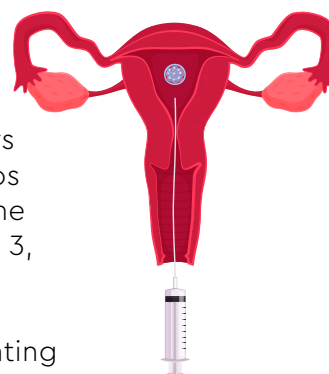


***The software has been developed by the team of renowned embryologist Dr. Jacques Cohen, who works exclusively with Institute of Life – IASO.**

4

Embryo Transfer

The fertilized eggs, i.e. the embryos, remain in incubators that mimic the conditions of the endometrium. The embryos that develop properly are selected for embryo transfer. The embryo transfer usually takes place either during day 2 or 3, or during day 5 or 6.



The day 5 or 6 embryos are called "blastocysts". Cultivating the blastocyst offers us the option to select the embryos that have the required potential for further growth.

The embryologists or your treating physician will inform you about the quality of the embryos and about which embryos will be transferred to your endometrium.

On the day of the embryo transfer, you must have consumed plenty of fluids, so that your urinary bladder is full, to ensure the best possible ultrasound imaging of your endometrium.

The embryo transfer is a painless procedure that is performed without anesthesia. The embryo(s) to be transferred are aspirated with a thin, flexible catheter by an embryologist and then placed in the uterine cavity under ultrasound guidance.

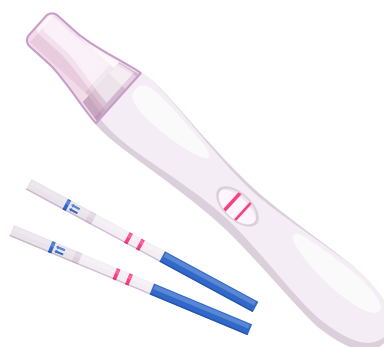
After the embryo transfer is completed, you will be given clear instructions about the pharmaceutical treatment that must be followed, as well as some general guidelines. **In all events, healthy nutrition, relaxation and mild physical activity are recommended.**

On the day of the embryo transfer, do not forget to bring along your RI Witness card, which you must show to the Unit nursing staff.

5

Pregnancy Test

According to the instructions of your treating physician, ten to fourteen days after the embryo transfer, you will undergo a **blood test to measure the chorionic gonadotropin level** (pregnancy test). If the test is positive, it will be repeated in 2 days.



Embryo Cryopreservation

The surplus embryos that will arise may be preserved using the cryopreservation method, for as long as stipulated by the law. These embryos can be used in the next embryo transfer cycles, until pregnancy is achieved, or if the couple wishes to have more children.

In this case, after consultation with your treating physician, the embryos are thawed and then placed in your endometrium, using the simple embryo transfer method

Find out all about the special **My Cryopreservation & My Fertility Preservation** packages for cryopreservation of your genetic material



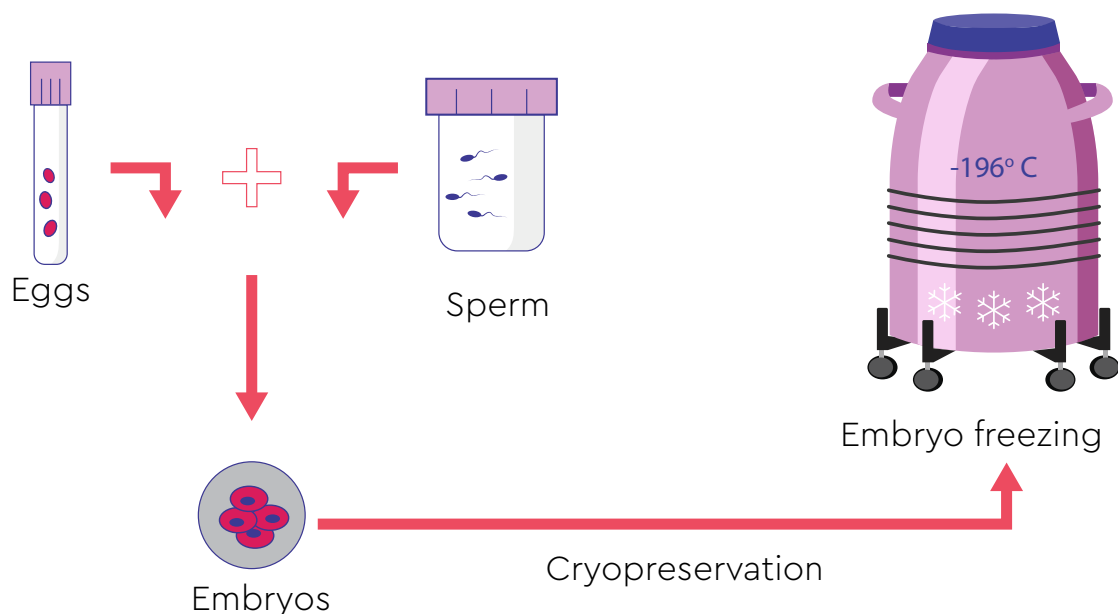
They offer up to 50% discount to couples who choose them



They run for 3 or 5 years



They waive your obligation to pay annual storage fees (according to the Unit's policy, if a package is not chosen, upon renewal every year, you are required to inform us of your intention to renew and pay the corresponding annual storage charge).



Counseling

As an experience, IVF emotionally affects both partners, probably each one differently. The emotions vary and this is normal. No emotion should make you feel uncomfortable. The most important part of counseling is to help you manage intense emotional changes, so you may adapt to the treatment conditions realistically and with optimism.



The Institute of Life – IASO focuses on advising you and helping you manage your emotions and the thoughts that arise during assisted reproduction. Our aim is to ensure your pleasant disposition, so as to foster balance and optimism at every step of the process.

We offer all of you who place your trust in us access to advice from experienced and qualified psychologists throughout your IVF attempt.

Counseling is a **free and confidential** service available to all of you visiting the Institute of Life for your IVF attempt.

Contact the Unit Reception on +30 210 618 4030 & +30 210 618 4022 and book an appointment in the way that suits you best (online or at our Unit).

We are standing by
you every step of
the way to remind
you that you are not
alone in this dream.

**We are all in this
together**

Required supporting documents to join the assisted reproduction program

To undergo an IVF attempt, you must submit the following supporting documents:

- **Photocopies of photo IDs**
- **Marriage Certificate issued within the last 6 months**
- **Family Status Certificate issued within 25 days from the date of the scheduled egg retrieval / transfer of the cryopreserved embryos**
- If you are an unmarried couple cohabiting freely or if you are single, you must submit a notarial deed (find out more from the Reception staff)
- If you are an unmarried couple cohabiting freely or if you are single, you must submit a notarial deed (find out more from the Reception staff)
- If you were married outside Greece, then you must submit a Marriage Certificate issued within the last six months and its official translation into Greek

The following examinations are required (performed within the last three months, and signed and stamped by a doctor):

HIV I/II, HBsAg (Australian antigen), Anti HCV/total, RPR for both partners. In addition, a mammography / breast ultrasound is recommended for women over 35 years.

Recommended additional tests that the treating physician may request, depending on the case:

♀ For the woman:

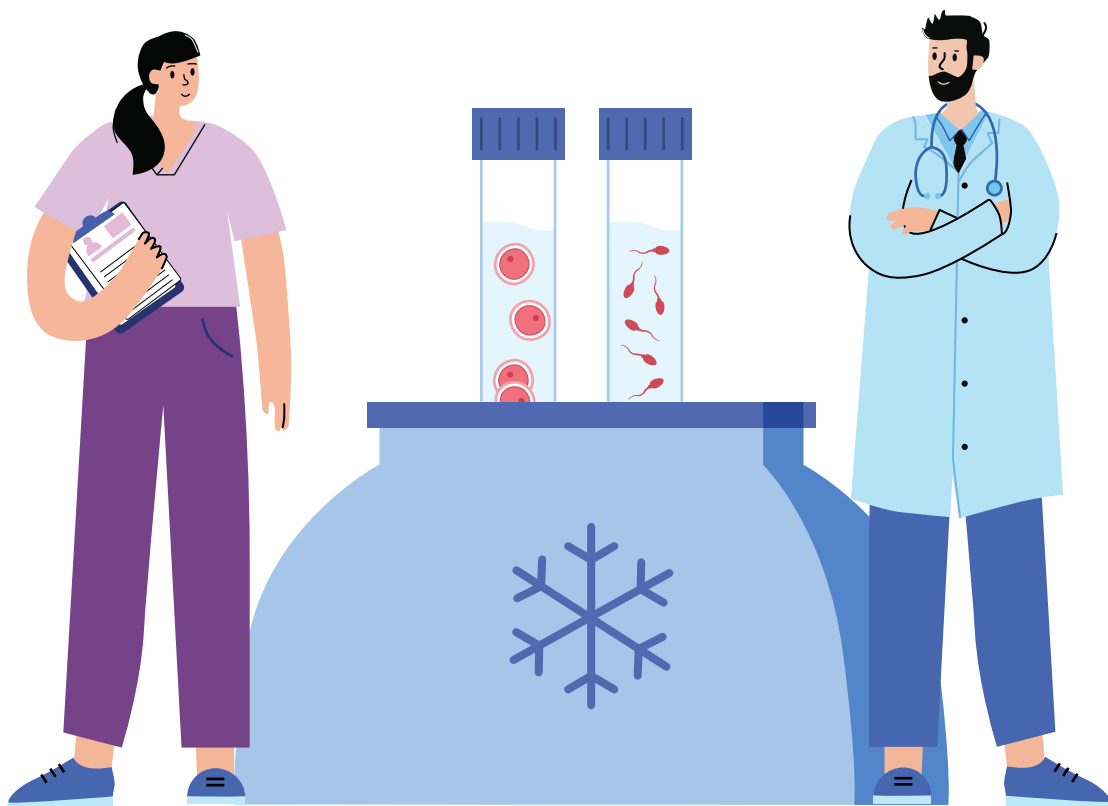
IgG and IgM red-cell antibodies
CMV IgG and IgM
Toxoplasmosis IgG and IgM
TSH
Comprehensive endocervical culture
Hemoglobin electrophoresis / Complete blood count / Iron
Ferritin / Sickle-cell test
Blood type – Rhesus

♂ For the man:

CMV IgG and IgM
Semen treatment and culture
Hemoglobin electrophoresis / Complete blood count / Iron
Ferritin / Sickle-cell test
Blood type – Rhesus
Cystic fibrosis / Blood karyotype

For further information, call the Unit Reception on +30 210 618 4022 and +30 210 618 4030, Monday-Saturday 08:00–16:00.

Fertility Preservation



Egg Freezing

The number and quantity of eggs start diminishing after 35 years, and so does the chance of pregnancy. Egg freezing offers a solution to this problem. Although the age limit has not been accurately determined, fertility specialists advise that the sooner cryopreservation is performed the more effective it is.

1

Monitoring

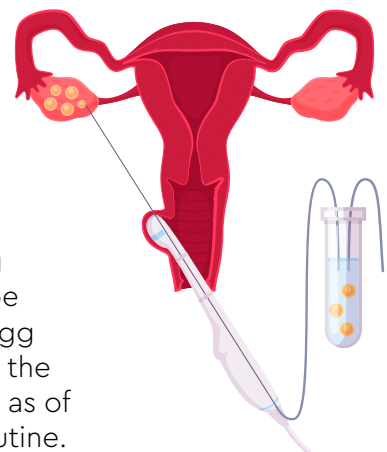
The steps of the procedure are fairly simple. The procedure is concluded in 10–14 days. During this time, proper pharmaceutical treatment is administered for many eggs to mature. Alternatively, egg retrieval may be scheduled without drugs, as part of the natural cycle, or with mild pharmaceutical treatment. The maturation of the egg follicles is monitored through ultrasound and blood tests. When the dominant ovarian follicle reaches the right size, a chorionic gonadotropin injection is administered and egg retrieval is performed 34–36 hours later.



2

Egg Retrieval

The egg retrieval procedure is simple, relatively painless and short. It is performed in a special room of the Unit under aseptic surgery conditions, with mild anesthesia, i.e. twilight anesthesia. If the number of egg follicles is small, such as during the natural cycle, then the procedure may be performed without anesthesia. After the egg retrieval procedure, you will need to stay in the recovery room for a short period of time and, as of the next day, you may return to your daily routine.



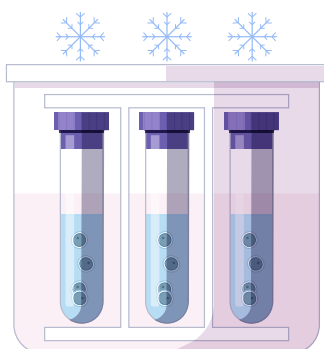
Eight hours before the egg retrieval, you must not consume any food or drinks. You are advised to avoid sexual intercourse, vigorous activities and swimming at sea before and after the egg retrieval. **Especially right before you visit the Unit on the day of the egg retrieval, avoid wearing perfume and painting your nails.**

After the egg retrieval is completed, you will be given clear instructions about the pharmaceutical treatment that must be followed, as well as some general guidelines.

On the day of the egg retrieval, you will receive your personal RI WITNESS card with a unique personal code number, which will be used to identify you throughout the procedure and which is exclusively linked to your genetic material. This advanced system operates as an online safeguard, as your genetic material samples are tracked throughout the assisted reproduction process, eliminating the chance of human error. You must carry the RI WITNESS card with you during any medical procedure you undergo at our Unit.



3



Cryopreservation

The eggs are cryopreserved in the lab using the modern vitrification method. The benefits of ultra-rapid vitrification using the Kitazato protocol allows us to achieve a high survival rate after egg freezing and thawing, at 92%. The eggs may remain in the Cryopreservation Bank for many years, without their quality being affected. According to the Greek legislation, egg cryopreservation is permitted for 5

years, with the option of extending this period. The duration of cryopreservation may be extended for 5 years each time, provided that the woman has not reached the age of 50*, following an application in writing by the interested parties, with a maximum extension limit of 20 years.

*Ask your treating physician about the option of extending the age limit due to the emergency measures imposed because of the COVID-19 pandemic.

How can I use them?

When you decide to start the assisted reproduction process, the eggs are thawed and prepared for fertilization in the lab, along with sperm from your spouse/partner or a donor.

For the required supporting documents and special packages, see p. 16

Sperm Cryopreservation

All the latest studies reveal that 40% of fertility problems are linked to the male factor. These rates keep increasing. Sperm quality is affected by:



Eating habits



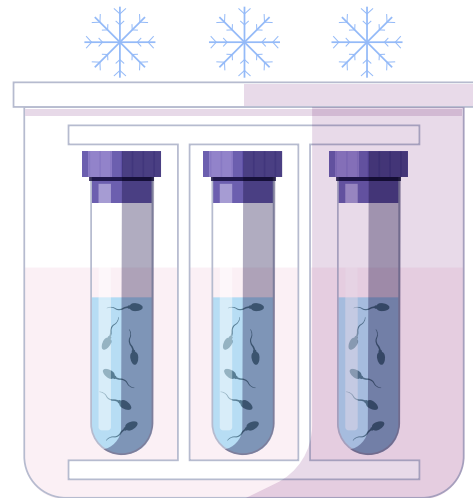
Environmental conditions



Work conditions



Lack of exercise



The need to extend fertility due to postponing having children (financial or social reasons, etc.) or due to medical reasons (e.g. malignancy, varicocele, endocrinology disorders) renders sperm cryopreservation necessary. Cryopreservation is the process of storing sperm, after it has been processed by the dedicated Institute of Life – IASO Andrology Lab, which secures its subsequent use later on for successful fertilization.

Does it apply to me?

Sperm cryopreservation is indicated when:

- ☐ You are about to undergo IVF along with your spouse/partner, but are away often due to work commitments
- ☐ You are about to undergo reproductive tract procedures
- ☐ You are exposed to toxic factors (chemicals, radiation, high temperatures)
- ☐ You want to postpone your plan to have a family
- ☐ You are about to undergo special procedures (chemotherapy, radiotherapy)

What is the process?

The process is very simple. To have your sperm cryopreserved, book an appointment with the Institute of Life – IASO Reception (Monday-Saturday, 08:00–16:00, at +30 210 618 4030, +30 210 618 4022). On the day of your appointment, you may visit our premises to deposit your sample or you may submit a sample from home, provided you have followed the instructions of the Institute of Life – IASO staff.

**For the required supporting documents and
special packages, see p. 16**

Ovarian Tissue Cryopreservation

Ovarian tissue cryopreservation is a method to protect the female reproductive ability when it is threatened by treatments performed for malignant diseases, and can restore normal ovarian function in the future.

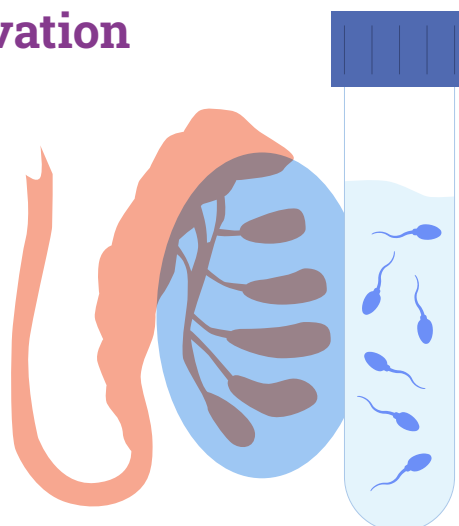
During ovarian tissue cryopreservation, the outer layer of an ovary, which contains a great number of your eggs, is removed using laparoscopy or laparotomy and frozen for future use in the Unit's Cryopreservation Bank.

Ovarian tissue freezing is an internationally accepted method, but its functionality after transplantation is still being researched. Progress is continuous, though, and there is still hope for reproduction.

Testicular Tissue Cryopreservation

Testicular tissue cryopreservation is a valuable fertility preservation technique. In cases of azo-spermia, testicular tissue biopsy is performed to:

- Confirm the presence or sperm or not
- Check the chance of malignancy
- Collect and cryopreserve sperm from the testicular tissue, if any is detected



The testicular tissue is treated in the Andrology Lab, so that sperm suitable for fertilization or future storage is isolated. The sperm and/or testicular tissue are stored in cryopreservation at the lab, where they remain until they are used in a future IVF attempt.

When does it concern me?

- If no sperm is detected after repeated sperm checks
- If you are about to undergo cancer treatment and are at risk of developing azo-spermia after therapy

For the required supporting documents and special packages, see p. 16

Required supporting documents to join the egg & ovarian tissue cryopreservation program

- You must bring along a photocopy of your photo ID
- If you are single, you must submit a notarial deed and a Family Status Certificate issued within 25 days from the date of the scheduled egg retrieval (find out more from the Reception staff)
- If you are married, you and your spouse must sign the required consent forms at our Unit and submit a Marriage Certificate issued within the last 6 months, as well as a Family Status Certificate issued within 25 days from the date of the scheduled egg retrieval
- You must have undergone blood tests for **HIV I/II, HBsAg (Australian antigen), Anti HCV/total, RPR** (performed within the last three months, and signed and stamped by a doctor)

Required supporting documents to join the sperm & testicular tissue cryopreservation program

- You must bring along a photocopy of your photo ID
- If you are married, you and your spouse must sign the required consent forms at our Unit and submit a Marriage Certificate issued within the last 6 months, as well as a Family Status Certificate issued within 25 days from the date of the scheduled procedure
- You must have undergone blood tests for **HIV I/II, HBsAg (Australian antigen), Anti HCV/total, RPR** (performed within the last three months, and signed and stamped by a doctor)

All required blood tests may be performed within our Unit. Our Unit staff will update your medical record with the results of your blood tests.

Special My Cryopreservation & My Fertility Preservation packages for all those wishing to freeze time



They offer up to 50% discount to those who choose them



They run for 3 or 5 years



They waive your obligation to pay annual storage fees (according to the Unit's policy, if a package is not chosen, upon renewal every year, you are required to inform us of your intention to renew and pay the corresponding annual storage charge).

Find out all about the additional benefit packages for holders of Piraeus Bank cards and the special packages for COSMOTE & VIANEX employees (relates to the egg cryopreservation program).

Alternative Solutions



Egg Donation

Egg donation is anonymous and is safeguarded by a strict legal framework that protects both the couple and the donor.

When does it concern me?

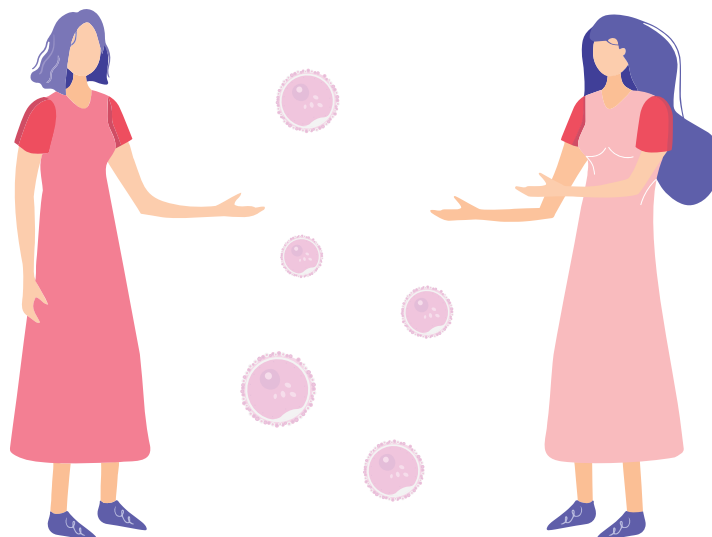
- If you belong in the high reproductive age category
- If you have few and bad quality eggs
- If you have undergone radiotherapy or chemotherapy
- If you are in early menopause
- If you cannot produce your own eggs

If you belong in one of these categories, then egg donation can offer a solution and fulfill your wish of becoming a mother!

How does it work?

In the beginning, the healthy donor commences hormonal therapy. This is followed by egg retrieval and fertilization of the egg with the sperm of the recipient's spouse/partner or with donor sperm. Using the simple embryo transfer procedure, the fertilized eggs are transferred to the recipient's endometrium.

If any surplus embryos arise, they are cryopreserved to be transferred during a future attempt.



For the required supporting documents, see p. 20

Sperm Donation

Sperm donation is a suitable solution when, following special andrology testing, the sperm of the spouse/partner is not deemed suitable for egg fertilization or in cases of azoospermia. Sperm donation is also available in cases of women who wish to have a child, but do not have a partner. The process is legal according to the Greek legislation.



When does it concern me?

- When the sperm produced is not capable of fertilizing the eggs (reduced motility, reduced number, abnormal morphology, etc.)
- When the sperm demonstrates high level of DNA fragmentation*
- When there is a chance of passing on a hereditary disease
- When no sperm is detected in the ejaculate***
- When no sperm is detected after testicular biopsy

**At the new Institute of Life – IASO Andrology Lab you can undergo detailed testing of your sperm.*

***If no sperm is detected, and following the treating physician's guidance, the patient may undergo testicular biopsy.*

How is the selection performed?

After discussion with and guidance from your treating physician, you may decide on which sperm bank to use to select the donor, based on the phenotypic traits and the blood type.

Sperm from a sperm bank may be used both for insemination and for IVF.

Our center works with various sperm banks in Greece and abroad.

For the required supporting documents, see p. 20

Required supporting documents to join the egg & sperm donation program

To undergo an IVF attempt via donation, you must submit the following supporting documents:

- **Photocopies of photo IDs**
- **Marriage Certificate issued within the last 6 months**
- **Family Status Certificate issued within 25 days from the date of the scheduled egg retrieval / transfer of the cryopreserved embryos**
 - If you are an unmarried couple cohabiting freely or if you are single, you must submit a notarial deed and a Family Status Certificate (find out more from the Reception staff)
 - If you have a cohabitation agreement you must submit a notarial deed issued within the last six months and a Family Status Certificate that includes the cohabitation agreement
 - If you were married outside Greece, then you must submit a Marriage Certificate issued within the last six months and its official translation into Greek

**The following examinations are required
(performed within the last three months, and signed and stamped by a doctor):**

HIV I/II, HBsAg (Australian antigen), Anti HCV/total, RPR for both partners. In addition, a mammography / breast ultrasound is recommended for women over 35 years.

You must also submit (only for the egg donation program):



For the woman:

IgG and IgM red-cell antibodies
CMV IgG and IgM
Toxoplasmosis IgG and IgM
Blood type – Rhesus



For the man:

Hemoglobin electrophoresis / Complete blood count / Iron
Ferritin / Sickle-cell test
Blood type – Rhesus

For further information, call the Unit Reception on +30 210 618 4022 and +30 210 618 4030,
Monday-Saturday 08:00–16:00.

Surrogacy

A surrogate mother is a woman who carries an embryo for a couple in which the woman is not able to fall pregnant.

When pregnancy is impossible or life threatening for a woman (e.g. when the uterus is absent or when she has a serious medical condition, genetic or acquired, such as heart disease, high blood pressure, liver or kidney disease, history of recurrent miscarriages, etc.), she may resort to surrogacy.



The process is completely legal and it is regulated by the provisions of Article 1458 of the Civil Code and Article 13 of Law 3305/2005. It is permitted by court permit, which is granted provided specific conditions are met. The applicant must be medically unable to become pregnant, as proven by medical documentation.

Necessary conditions for the surrogate mother:

- She must be aged between 25 and 45
- She must be of sound health
- She must have at least one child of her own
- She must not have undergone more than two C-sections
- She must undergo the medical exams stipulated by law
- She must have undergone a full psychological evaluation
- She must sign a private agreement between herself and the future parents (if she is married, the spouse must also consent) and fully abide by the terms
- The genetic material (eggs) that will be used must not belong to the surrogate mother

How is the procedure performed?

IVF is performed using genetic material from the couple or anonymous donors, if necessary. The fertilized eggs are then transferred to the endometrium of the surrogate mother.

Before the embryo transfer, it is necessary to get issued with a special court permit, which consolidates the rights of the biological parents and also protects the surrogate mother

Our Unit offers extensive counseling on the issue of surrogacy. We address all possible aspects, from emotional and mental effects, to the tests surrogate mothers must undergo. We also provide the best choices for the most optimal IVF method in each case, always in line with the legal framework in force.



Female Fertility Testing



Female Endometrial Testing

I want to increase my chances of having a baby!
I wish to:

- Find out the right time to implant the embryo
- Maximize my chances for successful embryo transfer
- Address chronic endometriosis
- Help my body welcome the embryo
- Check the microbial level of my endometrium

At the Institute of Life – IASO we offer women the right tools to make their dream come true.

Do not hesitate to find out more from your treating physician or the qualified Institute of Life – IASO staff about the latest dedicated endometrial tests, available in partnership with leading scientific centers abroad.

Dedicated endometrial tests:

- ER-MAP®
- IM-MAP®
- KIR & HLA-C
- ALICE® TEST
- EMMA®
- EndomeTRIO®
- Endometrial screening

Through these special tests you can get the answers you need, address repeated IVF failures and decrease the miscarriage rate.

Male Fertility Testing



Andrology Lab

Infertility does not just affect women. It is estimated that around 40% is attributed to causes exclusively linked to the male factor, 40% to the female and 20% to both spouses/partners or to unexplained infertility.

At the Institute of Life – IASO we have established a state-of-the-art Andrology Lab, staffed with qualified and experienced biologists, who can offer guidance, so you may find answers to your questions.

Based on the information offered by the new and advanced tests performed at our Lab, individualized treatment is an option.

The new Institute of Life – IASO Andrology Lab offers a wide range of advanced tests, such as:

-  Oxidative stress analysis
-  Sperm DNA fragmentation testing
-  Microbiological and biochemical analysis with PCR
-  Sperm analysis (according to the WHO guidelines)
-  Immunology testing (detection of antisperm antibodies)
-  Sperm test processing
-  Sperm longevity testing
-  Hyaluronic acid binding assay
-  Acrosome reaction test
-  Sperm vitality test
-  Round cell identification
-  Urine sediment testing

What should I do?

Book an appointment with Institute of Life – IASO today, so we may address all your concerns.

Tel.: +30 210 618 4022 & +30 210 618 4030
Monday-Friday, 08:00–16:00

Genetic Testing



EMBRACE® (Non-invasive preimplantation embryo testing)

EMBRACE® is a non-invasive test that ranks and grades embryos based on their chromosomal analysis and helps in detecting the embryos that have the highest chance of having normal chromosomes, without the need to conduct biopsy. This information is important as it helps clinical embryologists choose the embryos that have the highest chance of implantation. This increases the likelihood of becoming pregnant on the very first try.

Institute of Life – IASO is the first assisted reproduction unit in Greece to offer the option of having the Embrace non-invasive preimplantation embryo testing performed, in partnership with IGENOMIX.

Who is it addressed to?

All couples who wish to increase their chances of getting pregnant without the use of invasive methods. The Embrace test is not recommended for couples with abnormal karyotype. In this case, blastocyst biopsy and preimplantation genetic testing are recommended.

Preimplantation Genetic Testing (PGT)

Preimplantation Genetic Testing (PGT) is a modern diagnostic method used to analyze the genetic material (DNA) of embryos. The process diagnoses inherited diseases and/or detects chromosomal anomalies that relate to a specific group of couples undergoing assisted reproduction. This way, it offers the chance of identifying the normal embryos before embryo transfer, increasing the likelihood of a healthy pregnancy.

Preimplantation Genetic Testing for Aneuploidy (PGT-A)

Preimplantation Genetic Testing for Aneuploidy (PGT-A), also known as PGS, is a technique that determine the chromosomal conditions of embryos, in the context of assisted reproduction. It permits selecting only embryos with the right number and structure of chromosomes (euploid embryos) to be implanted, by extension leading to the birth of a healthy baby.

Preimplantation Genetic Testing for Monogenic Defects (PGT-M)

When a couple carries genes that could be responsible for some severe inherited disease (e.g. thalassemia, cystic fibrosis), **Preimplantation Genetic Testing for Monogenic Defects (PGT-M)**, also known as **Preimplantation Genetic Diagnosis (PGD)**, is used to select the embryos that have not inherited a corresponding disease from the parents.

Preimplantation Genetic Testing for Structural Rearrangements (PGT-SR)

When a couple carries chromosomal rearrangements, such as weighted or not reversals and transpositions, they may encounter embryo implantation failures, high miscarriage rate and high risk of giving birth to children with severe genetic anomalies. A **Preimplantation Genetic Testing for Structural Rearrangements (PGT-SR)** is performed in this case to select the embryos that do not carry these chromosomal abnormalities.

Who should undergo genetic testing?

Couples who carry inherited disorders must undergo preimplantation genetic testing, as well as couples with the following indications:

- High reproductive age for the woman
- Recurrent embryo implantation failures
- Recurrent miscarriages
- History of previous pregnancy with abnormal karyotype
- Severe male factor infertility



You & Us, Creating together!

An experienced and qualified team of doctors, embryologists and nursing staff await you at the Institute of Life – IASO, ready to offer you guidance right from the very first appointment.

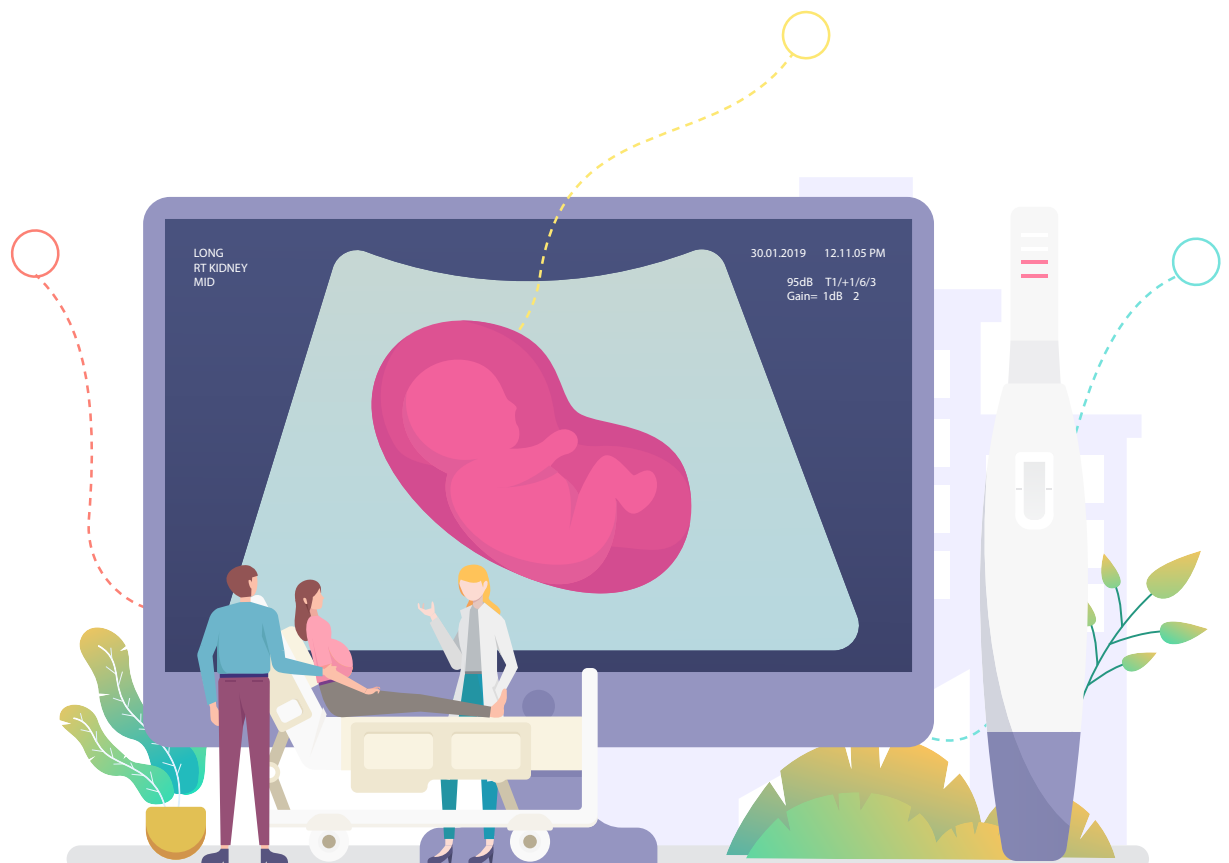
With early diagnosis through an extensive range of dedicated exams and advanced genetic tests, we apply the most modern, individualized assisted reproduction techniques in a state-of-the-art lab, helping hundreds of infertile couples make their dream come true!

You are eagerly awaiting the moment you'll be able to hold your baby in your arms.

We are standing by you, expending all efforts to make your wish of bringing a child into the world come true.

Together, we are eagerly awaiting the moment you will be bringing a new life into the world!

Because we are creating TOGETHER!



Useful Info

**Reception:**

+30 210 618 4022, +30 210 618 4030

Patient Accounts:

+30 210 618 4018, +30 210 618 5161

Nursing Staff:

+30 210 618 4038

Embryology Lab:

+30 210 618 4034

**Reception:**

ivf@iaso.gr

Patient Accounts:

ivfaccounting@iaso.gr

Nursing Staff:

ivfnosileutiki@iaso.gr

Embryology Lab:

ivflab@iaso.gr

**Operating Hours:**

Monday-Saturday,
08:00-16:00



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My notes

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WHERE EXPECTATION
MEETS SCIENCE



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