

Creator's IVF Nepal Pvt. Ltd. Fertility Health Care Centre

6th ANNIVERSARY

Special Annual Journal

(BS 2072-2078)



SERVICES

- Thorough Subfertility Couple Counselling
- Comprehensive Subfertility Workup of Subfertile Couple
- Transvaginal Sonography (TVS) of Subfertile Couple
- Sonohystero Salpingo Graphy (SSG)
- Timed Intercourse (TI)
- Intra Uterine Insemination (IUI)
- In-Vitro Fertilization and Embryo Transfer (IVF-ET) (Regular/Batch)
- Intra Cytoplasmic Sperm Injection (ICSI)
- Cryopreservation of Sperm
- Vitriification (Oocytes & Embryos)
- Donor Programme
- Andrology Services
 - a)TESA (Testicular Sperm Aspiration)
 - b)Semen Banking
- Pathology Routine/Hormone Estimation

26 August 2021
(10 Bhadra, 2078)



Preface

It's my great privilege to have few words today to express on this auspicious occasion of 6th anniversary of Creator`s IVF Nepal Pvt. Ltd. I feel tremendous pleasure to know that our company Creator`s IVF Nepal Pvt. Ltd. has successfully passed its six years journey of satisfactory services to our customers in the fertility sector in the country today. It is great news and matter of pride for all of us.

Though I just joined nearly a year ago into this organization as a CEO formally, I had been having in much closed contact with this company's BoDs from the day one since its birth. It was 26th August 2015, I still remember as it was just as yesterday that this organization was officially established in this building with ritual 'Puja'- The Day It started to operate services officially. Today I can proudly congratulate and thank all those who had and are working in this company for such a long journey. Without you and your hard work and tireless dedication, this company, the Creator`s IVF Nepal Pvt. Ltd. would not be able to reach on today's position. I confirm that it is effort of all you guys that made this all possible that we today have got to celebrate this occasion together. So as a Chief Executive Officer, I would like to thank and congratulate you all on behalf of Creator's IV Nepal management team. I would also like to say- "well done guys" and also expect your same enthusiasm, dedication and effort to bring our organization qualitatively much better in the company's future endeavors.

I hope that this first ever and 6th anniversary Special Journal issue will help to memorizing us lots about moments of our togetherness and togetherness with the lovely patients on the days of life to come.

Thank you all. Thank you very much.

Tribeni MS Pradhan
CEO/Board Member
Creator's Group
26th August 2021 (Thursday, 10th Bhadra 2078 BS)

Acknowledgement

I am so delighted to express a few words on the occasion of the 6th Anniversary of Creator`s IVF Nepal Pvt. Ltd.. It feels as though it was just yesterday we had started Creator`s IVF Nepal Pvt. Ltd.. Time flies so fast. Creator`s IVF Nepal Pvt. Ltd. was a dream project that came to my life very successfully. This success is attributed to all my staffs, colleagues, advisors and consultants working with me on the front line and behind. This project would not be materialized up to this level without their continuous hard work and support. I would like to thank them all and would be grateful to them for the rest of my life.

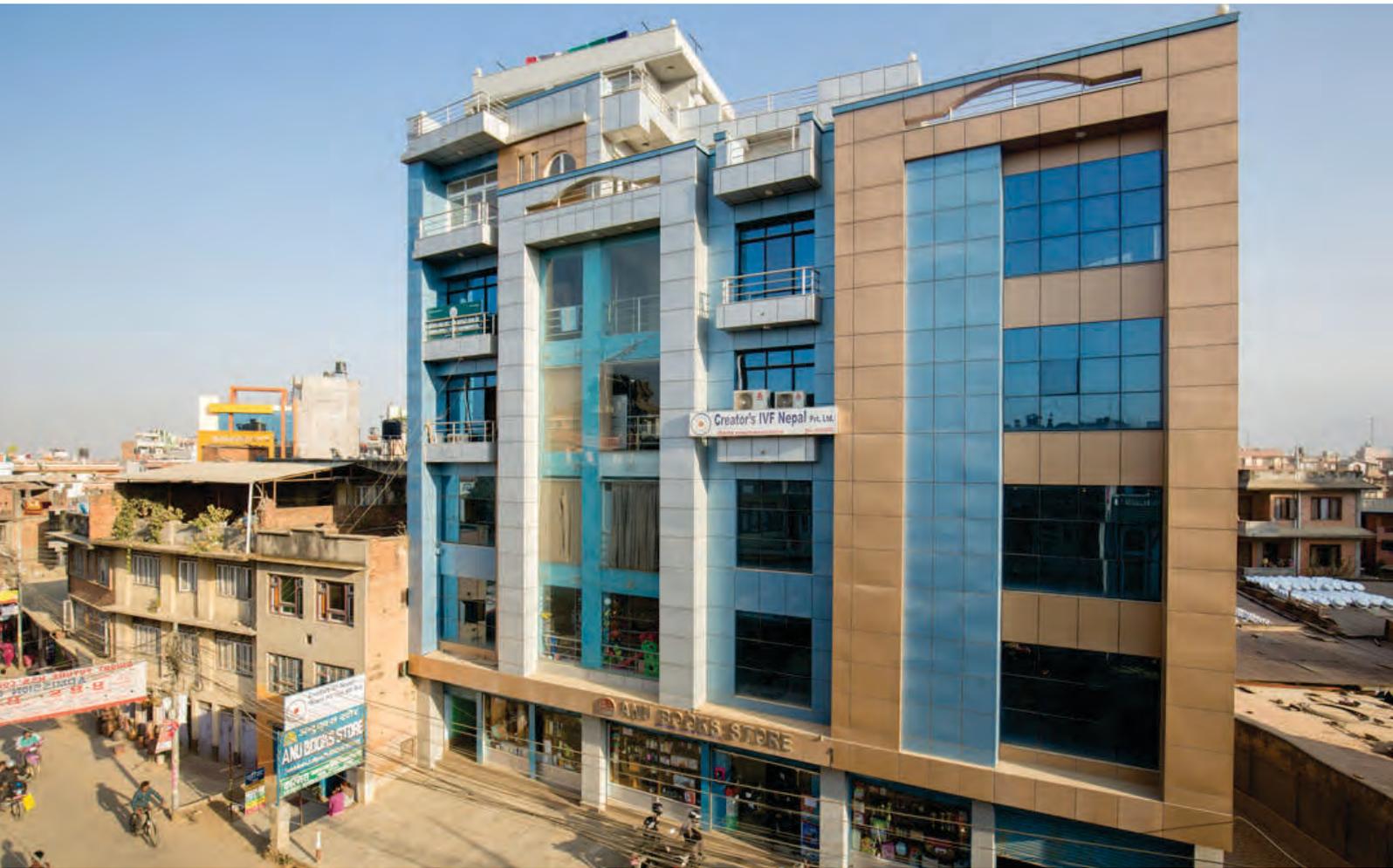
Thank you.

Dr. Sanu Maiya Shrestha (Pradhan)
Senior Consultant Gynecologist and IV Specialist, Creator`s IVF Nepal Pvt. Ltd.
Managing Director/ Chairman
Creator's Group
26th August 2021 (Thursday, 10th Bhadra 2078 BS)

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1. FOREWORDS

Medical science was made to ease the pain and suffering of humanity. Assisted Conception/ In-Vitro Fertilization (IVF) is one of the god gift medical sciences to ease the human pain and sufferings.

IVF, also known as Test-Tube Baby, has been around the world for more than four decades, which is gift of medical science to the world in the fertility sector.

From traditional days to present time, infertility has become synonymous for disappointment, despair and desolation in life. The childless couples go through extremer mental stress and such situations has led to social problems like violence, physical as well as mental, against women and even to male polygamy. **According to statistics, about 13-15 percent of married couples are suffering from this infertility condition.**

In July 25, 1978, the world's 1st I. V. F. Baby Louise Joy Brown was born in Manchester, England. Louise's mother had problem of blocked tubes. Louise's birth has been hailed as one of the greatest achievements in the medical field of Assisted Reproductive Technology (ART). Birth of Louise Brown was result of tireless efforts and research of surgeon Patrick Steptoe, Physiologist Sir Robert Edward and that has given great hope to many childless couples around the world.

Creator's IVF Nepal Pvt. Ltd. germinated out of **Dr. Sanu Maiya Shrestha (Pradhan)'s dream** to serve patients suffering from Infertility issues was established on 26th August 2015 (09 Bhadra 2072BS).

Since its founding in 2015, Creator's IVF Nepal Pvt. Ltd. has been able to provide improved and enhanced services in the field of assisted conception. Experts with decades of experience are at your service to help you in any way possible with our sophisticated IVF lab and a fully qualified Nepalese Medical IVF specialist team.

Because of our strong expertise, we are able to provide the dual option of carrying out IVF in regular basis as well as in batch/ groups with very good results.

This special journal gives you an overall general view of our Creator's IVF Nepal Pvt. Ltd., it's working team, its services and our achievements with its history at glance.



2. Looking Back; Inception & Initial Days

After eight years (2007-2015) at IVF Nepal Pvt. Ltd. Gwarko, Lalitpur, the whole team, under the leadership of Dr. Sanu Maiya Shrestha (Pradhan), moved from Global Hospital Premises to Satdobato, Lalitpur – 15 (Anu Books Store Building) with a new name “Creator`s IVF Nepal Pvt. Ltd.”, a new set up and better facilities. It is imperative to state about Dr. Sanu Maiya Shrestha (Pradhan)'s personal experience that has instrumental role in operations of IVF Nepal first, then establishment of Creator's IVF Nepal Pvt. Ltd..

Dr. Sanu Maiya Shrestha (Pradhan)'s personal experience:



From the time when I had started my practice as a Gynecologist and Obstetrician, I was concerned about issues related with infertile couple. This might be linked with my own similar traumatic experience of inability to conceive. In those difficult days, I was not fortunate enough to receive a medical service that was geared towards the treatment of infertility.

In the year 2000, while I was under preparation for my MRCOG Part 2, UK, I was selected for AUSAID scholarship to pursue Masters in Obs /Gyna and in Assisted Reproductive Technology (ART) in University of New South Wales (UNSW), Australia. My period of study in UNSW 2001 and 2004, has imparted rich knowledge of different aspects of ART and helped me developing different practical skills related to my subject.

After successful completion of course at UNSW, I joined Om Hospital IVF centre where I got an opportunity to implement my knowledge and at the

same time I was exposed to clinical practice. It was initial phase, when IVF service was being introduced in the country. After working restlessly in Om IVF centre for 3 years, I moved to Global Hospital with an objective to provide more customized service to patients with individual attention and care. I always had thought of providing a best possible service-oriented care to our infertile community. I was so impressed and inspired by the work culture at UNSW, Australia. I was determined to inculcate the same here. Hence, this inspiration leads me towards the establishment of CREATOR'S IVF NEPAL.

Infertility is a social phenomenon and inability to conceive can be very stressful and can bare huge strain on individuals and their relationships. Worldwide millions of people of reproductive age are affected by problem of infertility. Nepalis are no more an exception.

The intense enthusiasm, vigor inside me to help

distressed infertile Nepalese couples in a more scientific and an analytic way to have a healthy baby didn't let me remain static. During the days at Global IVF centre, I started training my clinical nurses for ART sub-specialty. At that time, there was no in house embryologist. Embryology is the skeleton of ART, and in order to fulfill this gap, on my initiation, one enthusiastic Nepali candidate is trained in embryology in United Kingdom. Creator`s IVF Nepal is now resourced with UK certified embryologist. My better half, Tribeni Man Singha Pradhan is one of my greatest blessings from God. "The secret to getting ahead is getting started" then and there itself. Words are less to express my gratitude towards him for continuous, relentless support throughout the entire period of completion of my dream project.

With a small dedicated group of my working staffs we moved towards the establishment of Creator`s IVF Nepal in the year 2015. Creator`s IVF Nepal was started after fulfilling all the required legal formalities as according to the nation's reproductive legislation. I would ever be grateful to my lawyer for his utmost support.

The year 2015 proved hard on all of us. The unannounced Nepal blockade has resulted in economic and humanitarian crisis. The blockade choked imports of not only petroleum but also the medicines. Creator`s IVF Nepal was severely affected as well. Moving ahead hand in hand and consistently with strong and determined team in close coordination of hospital management personnel, nursing staffs, service from an ISO accredited laboratory and all supporting staffs, the centre surpassed all the hurdles. In that stressful period, I was in despair. My late father Mr. Prem Lal Shrestha's those encouraging words still echoes in me and this has been my driving force all throughout. I feel the blessing of my beloved father every single day even though he is now no more.

Gradually Creator`s IVF Nepal started achieving the confidence of its patients and has created a niche for itself in the field of infertility treatment.

Creator`s IVF Nepal with its dedicated members has been consistently providing an advanced reproductive care to the Nepalese community for nurturing their dreams and hope of having a beautiful child.



CEO, Mr. Tribeni MS Pradhan's own version on history of how "Creators IVF Nepal Pvt. Ltd" was created:

Our (Me and Dr. Sanu's) Dream



I always had dreamed of doing something good, something worthwhile, individually or with the people I loved, trusted for the benefit of my beloved nation. I love my country a lot. I knew that I needed to make myself capable enough to contribute something for my country. So, I completed my secondary education and moved to university with the determination for serving my nation. After the completion of my MSc in Engineering, my vision to devote everything in the field that I was working for, did not come out as the way I had planned due to some circumstances. But then life took another turn, a beautiful turn. I got married to an ambitious woman Dr. SanuMaiya Shrestha. She was studying Obstetrics and Gynecology. Her dedication, determination and hardworking nature were evident to me. Analyzing and recognizing who a person really is, was my forte. She inspired and revived my dream of serving the motherland. She did

specialization in IVF in Australia with the help of the AusAID scholarship in 2004. After becoming an IVF specialist, she came back to Nepal and worked in Om IVF centre for about 3 years.

Dr. Sanu is incredibly enthusiastic and dynamic. She had been thinking that she can do more for the country in the field of IVF independently. I realized her potential to do so. I always encouraged and supported her to serve the country independently since the government was far behind in implementing a solid contribution in necessary sectors. As every journey starts with a hardship, unfortunately, our financial support was not on our side and our vision was just the painting in our thoughts, for the time being. Therefore, the starting of the service to the infertility sector had to wait for a while. Better late than never. While we were working on the planning phase, we found someone who was looking for a

person like Dr. Sanu who was experienced, enthusiastic, dynamic and reliable to invest in this sector. It was Dr. Gyanendra Man Singha Karki who had just started the Global hospital and was willing to start the IVF Services in his hospital. Dr. Karki contacted Dr. Sanu and after several rounds of discussions we came up with an agreement to co-operate with each other to set up an IVF centre in his hospital and start the services. Both agreed on the contract. It was in August 2007, Dr. Sanu as an In-charge initiated the IVF setup. Dr. Karki invested to set up a physical infrastructure required for the IVF clinic and embryology laboratory which was completed in 3-4 months. The IVF services started in December of the same year and started to run successfully with the name "IVF Nepal Pvt Ltd." at Global Hospital, Gwarko, Lalitpur. This centre ran for more than 7 years continuously with great success. Suddenly the Global hospital ownership had been changed and

transferred to a new owner and IVF Nepal Pvt Ltd underwent management dilemmas. The situation began to grow critical day by day. Even in this perilous situation, under the leadership of Dr. Sanu (being supported by Dr. Gyanendra), IVF Nepal kept running for more than a year. At this point, the only glue holding the organisation together was Dr. SanuMaiya Shrestha (Pradhan).

The frustration that Dr. Sanu faced was indeed very noticeable. Finally, she had no other option than to leave IVF Nepal Pvt. Ltd

I was in UK since 2008, but I had been in regular contact with Dr. Sanu on a daily basis. So, I was aware of every single moment of her situation and the condition of Global Hospital and IVF Nepal Pvt Ltd. IVF Nepal Pvt Ltd at that time was in a fragile situation. Dr. Sanu encountered difficulties in many sectors like rental payment, power supply and staff management including other

essential matters on the daily basis. Dr. Sanu had been very frustrated and my kids were growing up every single day. So, Dr. Sanu decided to move to the UK to spend the rest of her life together with the family. It was me who had advised her to stay in Nepal and continue providing IVF services to the nation. I assured and promised her that I will be back to support this project and the family. We discussed almost every day in this regard to find out the good time to plan, design and materialize to create a new IVF centre in Nepal. Finally in 2015 January Dr. Sanu came to UK to celebrate New Year 2015 with the family. On the same evening, we had a long discussion and finalized the decision to materialize a new IVF centre by the end of 2015. We worked hard and gradually commenced the initial works on it. We developed a logo and registered the Pvt Ltd firm at the concerned government authority with the name "Creator`s IVF Nepal Pvt Ltd". We applied for a loan from a

bank with the collateral of our building and the land. Then the booking of the required medical and other equipment for clinics was also completed. We chose a good location at Satdobato, Lalitpur for establishing our new centre. Dr. Sanu and the whole team moved to the new IVF centre to start a new beginning of the service.

I left my job in UK and came to Nepal to complete Creator`s IVF Nepal infrastructure construction and lab setup. Starting from the Logo to the functioning of the IVF centre it took us almost about six months. On 26th August 2015 with the blessings of our parents and astrologist, we got the date and time for the inauguration of the centre with ritual puja. This was the day our dream had come true. We all were so thrilled that day and celebrated with our traditional cultural Puja. Congratulations and gracious blessings from our parents, seniors and staff made the day even brighter.

The Struggle we had faced in the early year of the start-up

We inaugurated the IVF centre on 26th August 2015. Our plan was to start the services formally from the 1st of November 2015. Unfortunately, all of a sudden and unexpectedly the political situation came into the turmoil. The border between Nepal and India had been seized and all the imported goods were stopped at the border points between the countries. I had flown to UK to admit my elder daughter into college. Dr. Sanu suffered from a lot of frustrations and worries. She had already booked the patients for IVF treatment. There was no sign of the arrival of the equipment through the border. Dr. Gyanendra was the only hope for us. He had all the required IVF equipment in his hospital which was unused but still in working condition. We wanted to make a purchase from him and requested for that but he said he will require it for future use. After several requests, we were able to convince him. Dr. Karki provided the required equipment's to be used for the time being. That was a great help. We are truly grateful to him forever for his support at that critical moment. Finally, Dr. Sanu could start the IVF treatment on the promised date of 1st November 2015.

6th Anniversary of our Creator`s IVF Nepal and Creator`s Pharma.

Creator`s IVF Nepal was born on 26th August in 2015. On 26th August this year, the company crossing its 6th year. Creator's IVF has a sister organisation parallel on its side, the Creator's Pharma which has now become Pvt Ltd. We, the Creator's Group are incredibly proud, gratified, and thankful for our 6th Anniversary this year and all the previous years, for being able to provide continuous and satisfactory services to our patients and in the field of IVF services to the country. It may not seem much in the context of a whole nation but this at least helps and contributes for saving the country's money going out of the nation and commits determinedly to the sector of infertility. We acknowledge that this seems just like a drop of water in the vast ocean. But the drops of water together are what makes the ocean so huge and flourishing. We are very blessed and proud of the commitment and work that we have engraved. More Improvements and added hard work will never stop for the successful results and better services for our beloved patients. The summary of the output results during this six-year service benefited by our patients is illustrated graphically below (Please refer to Graph 1 to 7).

This statement wouldn't be fair if I don't mention following people who had toiled behind the curtain for materializing Creator`s IVF Nepal Pvt. Ltd. They are; Dr. Kersi, (Consultant Embryologist), Mr. Dijan Vaidya (Embryologist), Mr. Rahish Lal Shrestha (Board Member), Mr. Prakrit Shrestha (Legal Advisor) and Ms. Shrijana Rana.

Finally, our (me and Sanu's) hope, vision and the dream came true. These days, we both are working together in this centre and promising together to promote and develop this centre. Not just as a centre but as an organisation that spreads hope for all families out there in Nepal. We have the plan to transform this centre into newer heights and hopefully institutionalize this centre. We have the dream of expanding this service to a nationwide level if God blesses us with our hard work.

3. Creator`s IVF Nepal – Description

3.1 Description of services

Products and services

It is a common belief that Assisted Reproductive Treatment (ART) is an expensive method. While it is indeed expensive, not all patients require complex treatments. At times, depending on cases, simpler methods like TI and IUI is all that is needed. CREATOR`S IVF NEPAL offer a variety of services to be used based on the diagnosis of patients.

A. Thorough Subfertility Couple Counselling

Treatment starts from the discussion of all the previous history of both the partners and thorough examination is done for both male and female partners.

B. Comprehensive Subfertility Workup of Sub fertile Couple

Basic investigations (blood tests for both partners), detailed semen analysis and performing Hysterosalpingography (HSG) or SSG (Sonohysterosalpingography) only to those who have positive history for tubal damage.

C. Transvaginal Sonography (TVS) of Subfertile Couple

All female partners are advised for basic TVS to exclude any pathology. As per need they are referred to radiologist for further detailed sonography.

D. SonohysteroSalpingoGraphy (SSG)

Those patients who have positive history for tubal damage are suggested to undergo SSG under Power Doppler Ultrasound.

E. Timed Intercourse (TI)

This is the first line of infertility treatment in this centre for couples who have unexplained infertility.

F. Intra Uterine Insemination (IUI)

IUI is mainly for those couples who have mild male factor infertility. In this procedure, concentrated and processed sperms with high motility are placed directly in the uterus.

G. In-Vitro Fertilisation and Embryo Transfer (IVF-ET) (Regular/Batch)

IVF-ET or In-Vitro Fertilisation and Embryo Transfer involves retrieval of eggs from the ovaries of the female under ultrasound guidance, fertilizing these eggs in the controlled environment of the laboratory with the sperm of the male partner and after a short time interval transferring the embryo back into the uterus. This procedure is best suited to the needs of:

1. Women with blocked fallopian tubes
2. Persistent anovulation
3. Unexplained infertility after 3-6 failed IUI cycles

Regular and Batch IVF

Regular and Batch IVF service are provided depending on the case and suitability of the patient. At the initial phase IVF service was extended only in batches and it was from 23 Shrawan 2074, IVF services has been extended on regular basis.

H. Intra Cytoplasmic Sperm Injection (ICSI)

Intra-Cytoplasmic Sperm Injection (ICSI) differs from conventional In Vitro Fertilisation (IVF) and mainly two main groups of patients may be suggested ICSI:

1. Patients who have a severe sperm problem, which prevents them in even attempting conventional or a modified form of IVF.
2. Patients who have previously attempted IVF but have failed to achieve fertilisation (generally on more than one occasion).

I. Cryopreservation of Sperm

Sperm from ejaculated samples or from surgically retrieved samples can be stored for future use either for artificial insemination or other fertility treatments, or be donated.

J. Vitrification (Oocytes & Embryos)

Vitrification is a new method of preserving oocytes (eggs) and embryos. Once vitrified, oocytes and embryos may be preserved for many years.

K. Fertility Preservation for Cancer Patients (27 February 2019)

Creator`s IVF Nepal and Nepal Cancer Hospital and Research Centre Pvt. Ltd., Harisiddhi are working together to preserve precious fertility of young cancer patients by cryopreservation or vitrification of gametes, embryos and tissues.

L. Donor Programme

1. Sperm Donation: Sperm Donation is done with couples with informed consent and is advised for severe male factor as well as to them whom ICSI is not affordable.
2. Oocyte Donation: Analogous to the donor insemination programme for males, this procedure is for females suffering from premature ovarian failure and for women with advanced age.
3. Embryo Donation: Embryo donation is done with full consent of both partners.

M. Andrology Services

1.1. TESA (Testicular Sperm Aspiration)

Sperm is surgically extracted directly from the testicles by passing a fine needle directly into the testicle. A small amount of seminiferous tubules is extracted and examined for spermatozoa.

1.2. Semen Banking

This centre offers sperm banking service to men who may want to have children in the future.

N. Embryo Reduction

Embryo reduction both abdominal as well as transvaginal ultrasound-guided technique for the prevention and management of the medical and obstetric risks associated with high-order multiple pregnancy resulting from assisted reproductive treatment.

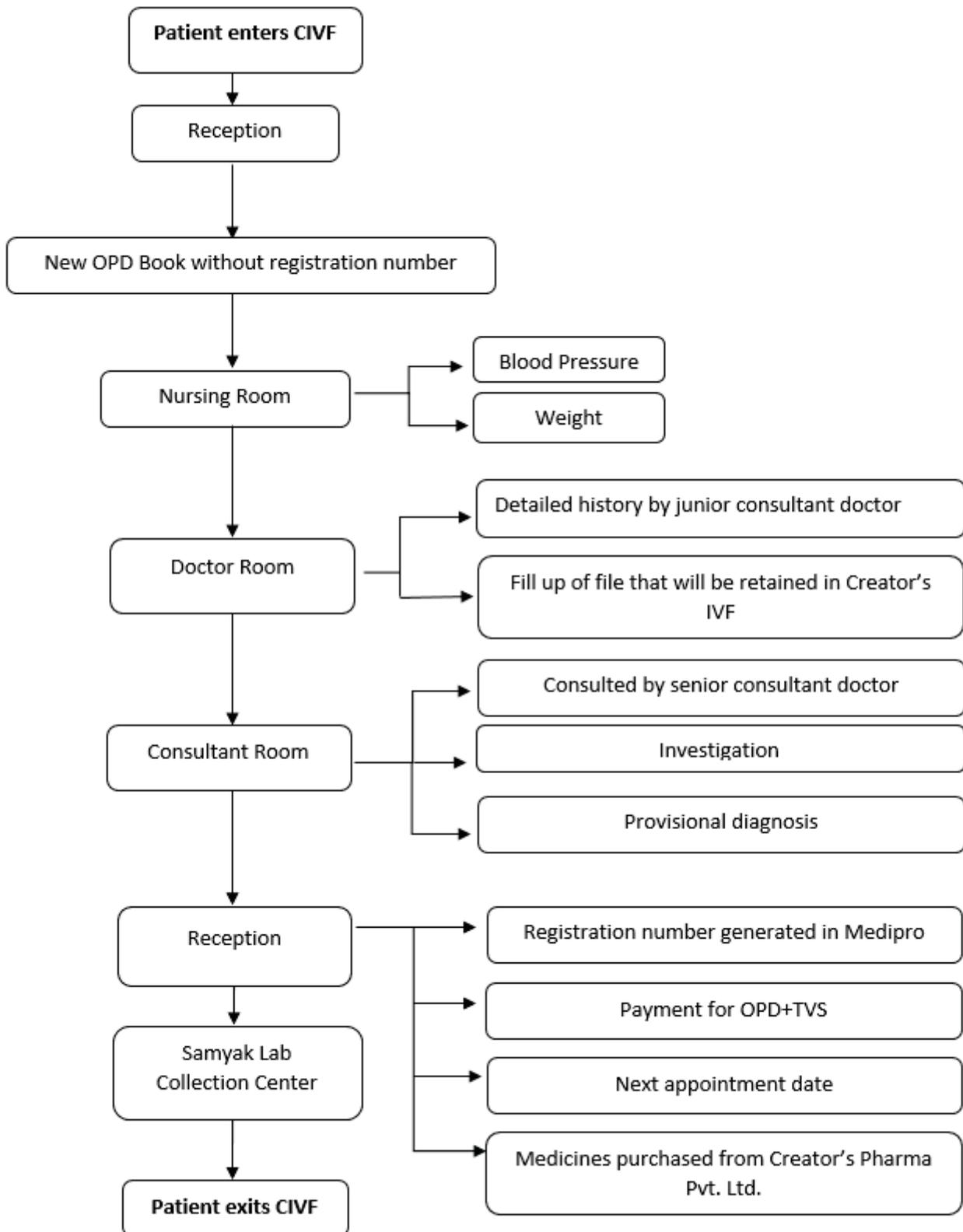
O. Pathology Routine/Hormone Estimation

This centre is associated with Samyak Diagnostic Pvt. Ltd. for routine pathological and hormonal tests.

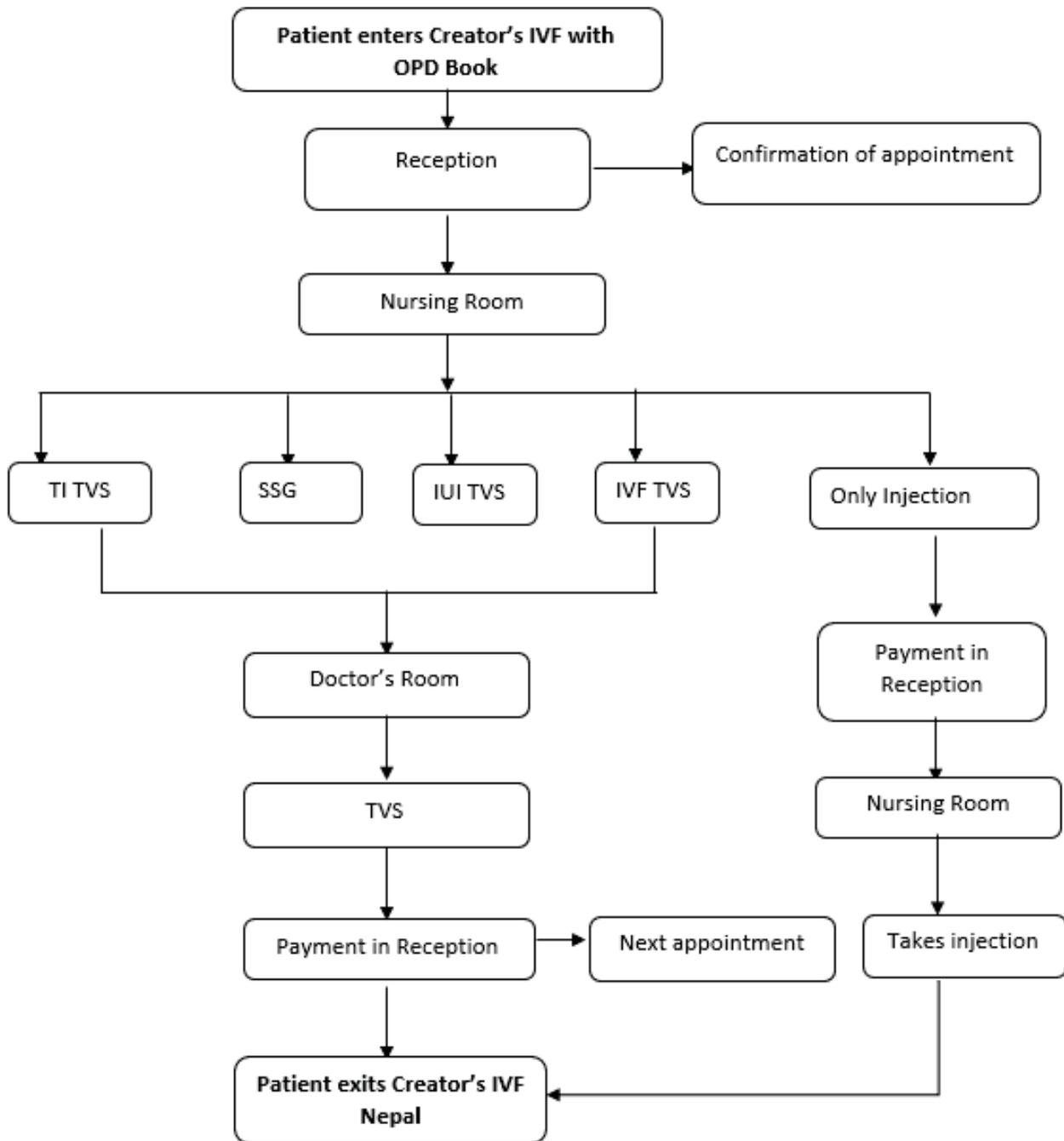
P. OPD service for general gynae/obs and radiology

Creator`s IVF Nepal has extended its services for general gynae/obs for its patients every week on Wednesday and also been providing radiology services.

Flowchart of New patient in Creator's IVF Nepal Pvt. Ltd.



Process of flow of old patient in Creator's IVF Nepal Pvt. Ltd.



3.2 Structure of Creator`s IVF Nepal Pvt. Ltd.

Shareholding pattern

Creator`s IVF Nepal is registered at Company Register Office with registration no; -1362390 /071/72. Existing shareholders, not in particular order are as stated below:

1. Dr. Sanu Maiya Shrestha (Pradhan)
2. Mr. Tribeni Man Singha Pradhan
3. Dr. Gyanendra Man Singh Karki
4. Mr. Rahish Lal Shrestha
5. Ms. Shrijana Rana

Board of directors

Articles of Association of Creator`s IVF Nepal, that has recently been amended, have provision of appointment of three board members. At present board comprises of Dr. Sanu Maiya Shrestha (Pradhan) as Chairman, Tribeni Man Singha, and Mr. Rahish Lal Shrestha as the members.

Management Team

The management team is led by Dr. Sanu Maiya Shrestha (Pradhan) in capacity of Managing Director from the beginning till date. Recently new CEO Mr. Tribeni Man Singha Pradhan has been appointed, who has previously been providing service to organisation in capacity of Principal Advisor. Team comprises of Assistant Managing Director and each unit is led by in-charges and capacitated with competent staffs. There are mainly ten units or departments namely :

- A. Doctors Unit
- B. Nursing Department
- C. Embryology department
- D. Administration
- E. Finance Department
- F. Reception
- G. Housekeeping and Sanitation
- H. IT Department
- I. Medical record unit
- J. Human Resource Department

From the inception phase, Creator`s IVF Nepal has been working in close cooperation with Shivani Scientific of Mumbai, India. Shivani Scientific has been providing all necessary technical support related with specialized instruments. Along with those two members of Shivani- Dr. Kersi M. Avari and Mr. Vivek Kank has been providing their services to Creator`s IVF Nepal.

Sister organisation

Creator`s Pharma Private Limited (CPPL) has been providing service to the patients of Creator`s IVF Nepal with in-house facility of over-the-counter pharmacy unit. CPPL ensures adequate supply of medicines for the patients of Creator`s IVF Nepal.

Associated organisations

Creator`s IVF Nepal is associated with *Samyak Diagnostic Pvt. Ltd.* for routine pathological and hormonal tests. Creator`s IVF Nepal is working with *Nepal Cancer Hospital and Research Centre Pvt. Ltd* to preserve precious fertility of young cancer patients by cryopreservation or vitrification of gametes, embryos and tissues. CREATOR`S IVF NEPAL is also associated with *Himal Hospital, Global Hospital* and *Nepal Medicity Hospital* for the hospital services for its patients. For legal and financial consultancy services Creator`s IVF Nepal is associated with *Corporate Services Pvt. Ltd.*

3.3 Operating review of last five years.

CREATOR`S IVF NEPAL started at the very difficult times of operating environment at times when country was just reeling under the shadow of Gorkha Earthquake of 2072 BS and followed by trade disruption at Southern Border that resulted in extremely difficult situation inside the country with shortage of all essential goods including fuel. And to make situation worse machinery imported from India for Creator`s IVF Nepal was stuck in border point for about six months. Despite such difficult situation Creator`s IVF Nepal started its operation on 2 Mangsir 2072 BS with full of zeal and enthusiasm to serve its patients. So, with utmost efforts of all team members of Creator`s IVF Nepal and its sister organisation Creator`s Pharma (later on converted to Creator`s Pharma Pvt. Ltd.) organisation was able to serve its patients without any hindrances / disruptions.

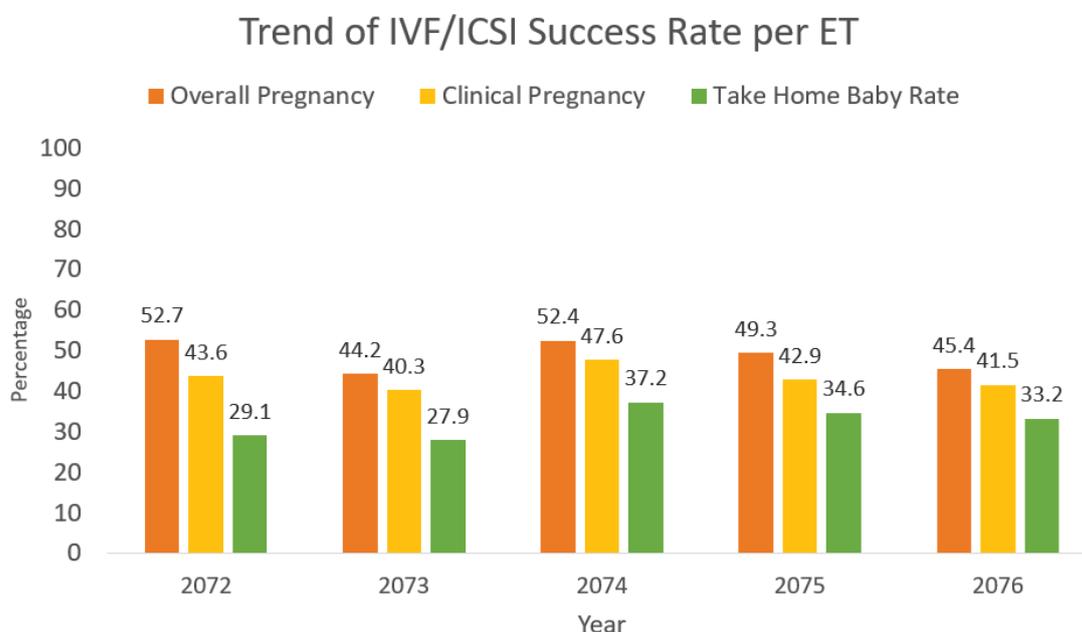
Graphical Presentation of operations and results for last five years

Table 1: Patients number and treatment cycles

Category	Year 2072/73	Year 2073/74	Year 2074/75	Year 2075/76	Year 2076/77*
Number of patients in OPD	2547	7184	7681	10004	8209
Number of IVF/ICSI cycles	89	121	175	239	146
Number of IUI cycles	204	327	303	444	341
Number of TI cycles	105	107	288	455	396

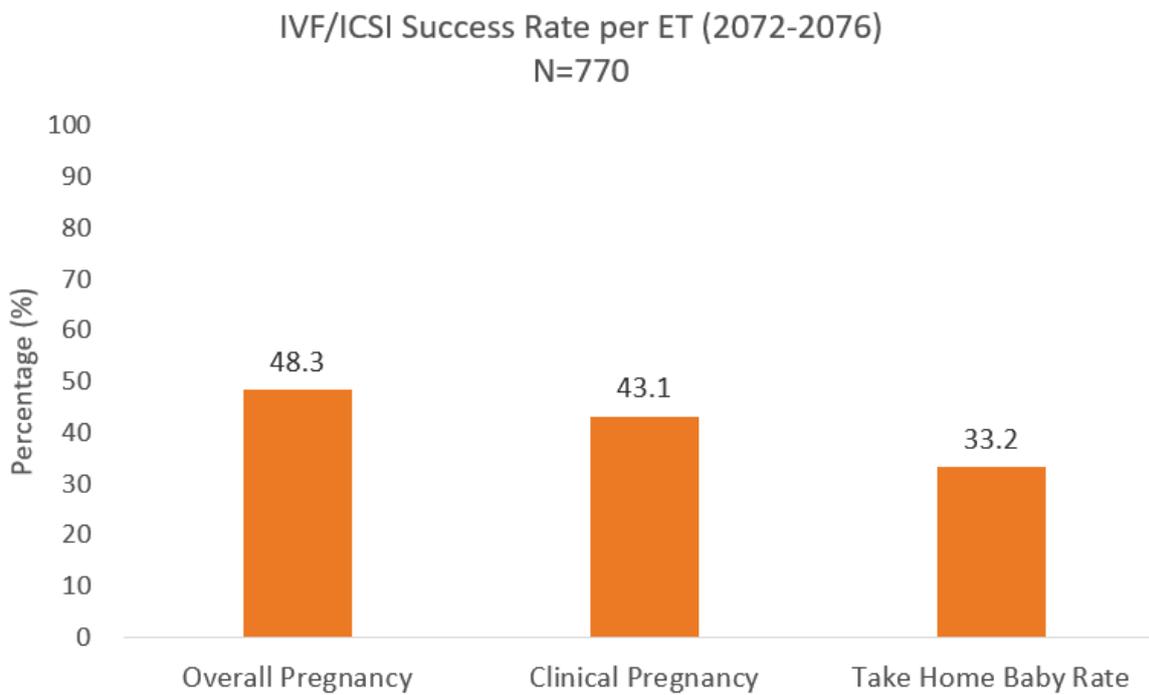
*- Covid -19 Pandemic entered in to the country in Chaitra 2076 and Lock down effected in the services.

Graph 2: Trend of IVF / ICSI Success Rate



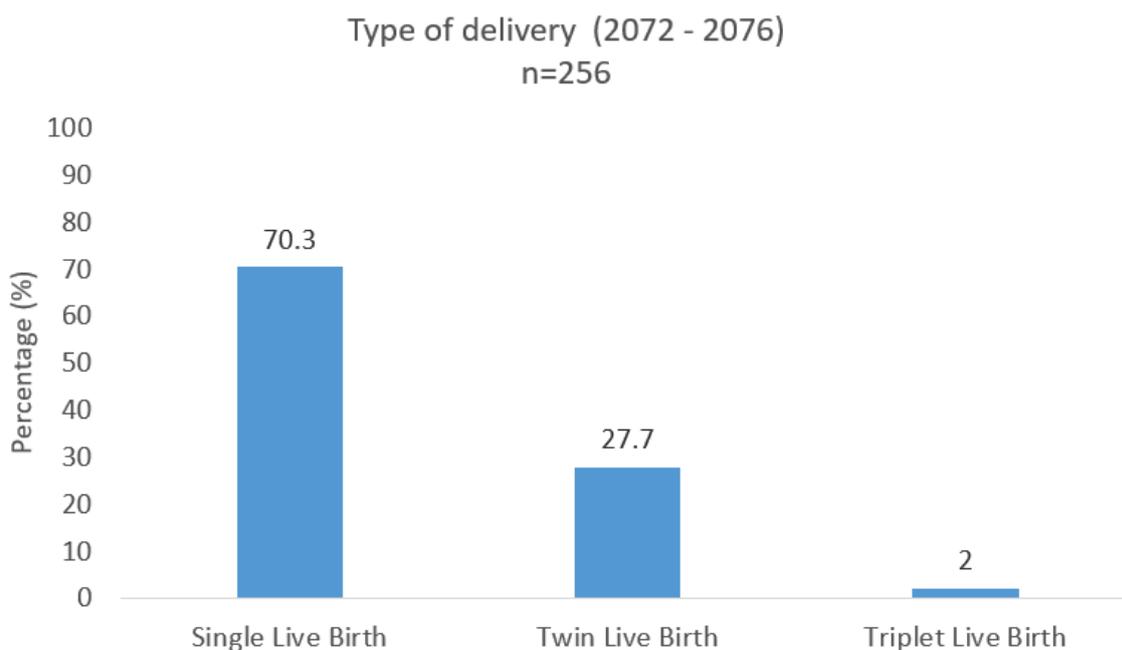
2077- Data are under processing.

Graph 3: IVF/ICSI Service Success Rate



2077- Data are under processing.

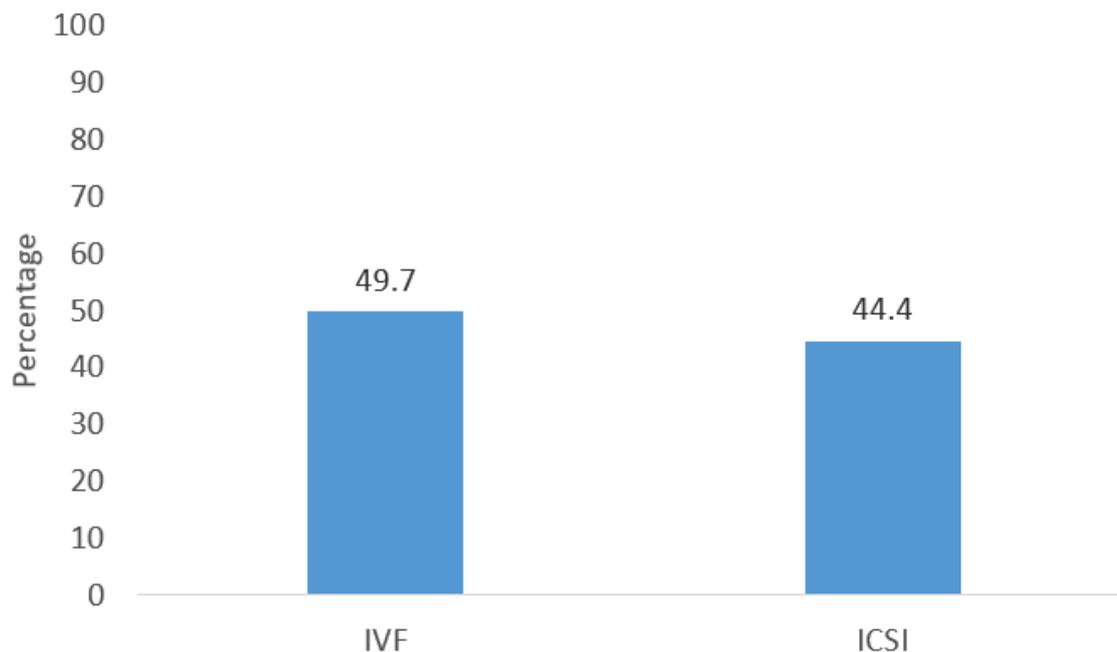
Graph 4: Delivery Types



2077- Data are under processing.

Graph 5: Pregnancy Rate by Treatment Type

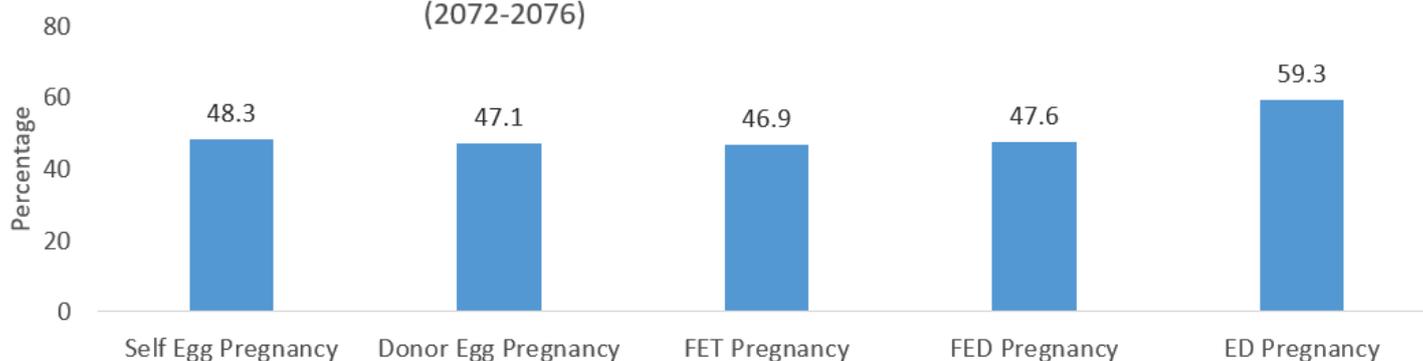
Pregnancy Rate by Treatment Type per Cycle (2072 -2076)



Treatment Type	Total cycles	Pregnant cycles	Percentage
IVF	565	281	49.7
ICSI	205	91	44.4

Graph 6: Pregnancy Rate by Treatment Type

Pregnancy Rate by Treatment Type per Cycle (2072-2076)

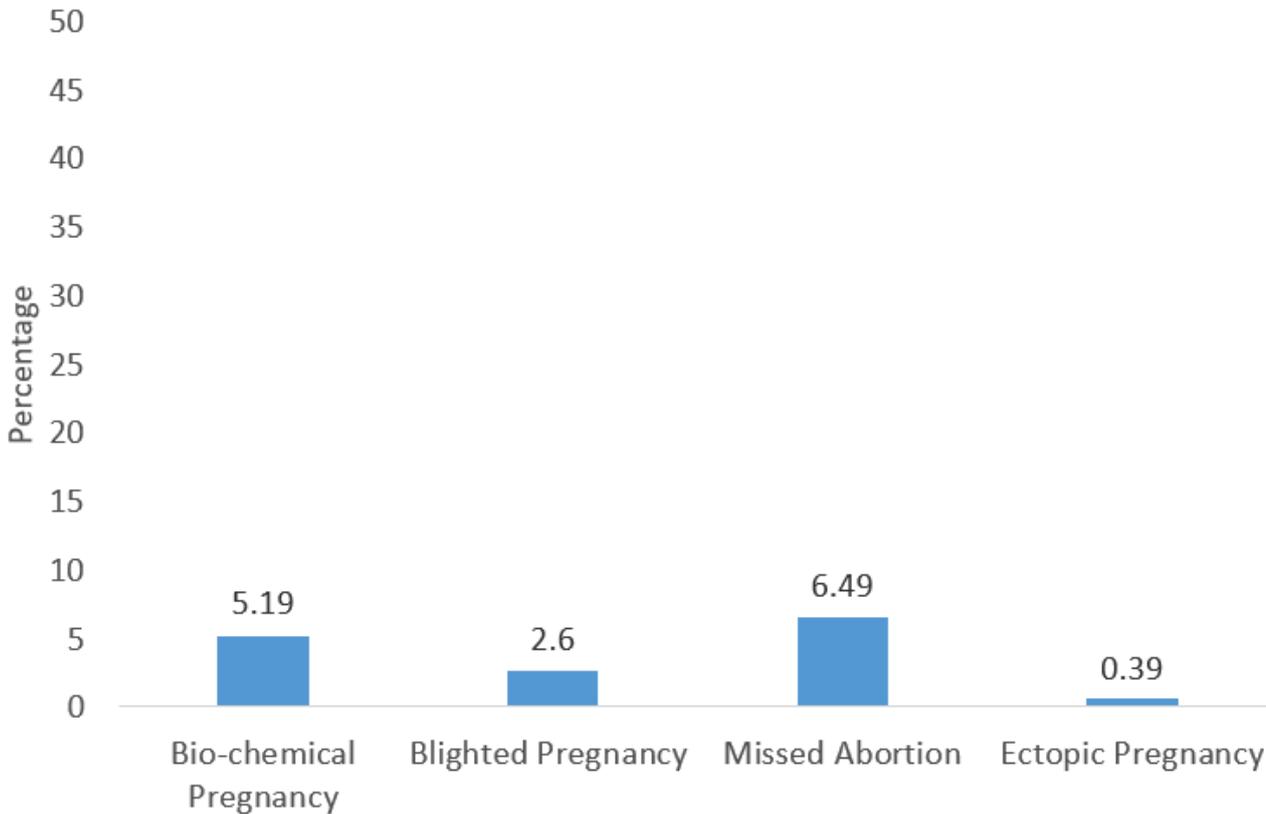


Treatment Type	Total cycles	Pregnant cycles	Percentage
Self-Egg Pregnancy	505	244	48.3
Donor Egg Pregnancy	153	72	47.1
FET	64	30	46.9
FED	21	10	47.6
ED Pregnancy	27	16	59.3

2077- Data are under processing.

Graph 7: Rate of miscarriage

Miscarriage Rate per ET (2072 to 2076)
N=770



2077- Data are under processing.

Human Resource

Employee

Creator`s IVF Nepal started off with the same staff members of IVF Nepal, and in total there were 11 staffs. Numbers of staffs were added as per the need of organisation. So now the employee strength has grown up to 26.

Human resources and their capability are the key to success of Creator`s IVF Nepal. The growth of the organisation can largely be attributed to the capable staff members. We do have staff members who has been contributing to the organisation for the last 13 years including services years of IVF Nepal. Loyalty, sincerity and dedication of staff members have been instrumental in successful operation of the Creator`s IVF Nepal.

We do believe in staff development, so we do provide opportunity for training and development to our staff member as required. During the course of services on these years our staffs are provided organizational support and sent even abroad as necessary for the training and for the higher education in respective courses and to list some of those are as stated below:

- Sabina Gwachha , Bachelors in Nursing, Embryology Training in Ahamedabad, India 2011
- Manita Maharjan; MBA One day Training on “Taxation Practice in Nepal” (2018/03/30-2018/03/30)
- Dijan Vaidya, BSc (Human Biology): ART training (Two weeks- 2014)- EART, Mumbai, India.
- Sabina Gwachya, BSc (Nurse): ART training (Two weeks-2014)- EART, Mumbai, India.
- Dijan Vaidya (Sn. Embryologist): “Master in Human Clinical Embryology and Assisted Conception “. (2015-16), Dundee University, UK.
- Dijan Vaidya (Sn. Embryologist): ART Training- “Advance Course in ICSI,2019- EART, Mumbai, India.
- Khusbu Adhikari; Hands on Training Program “Let's Do ART, (2018/04/02-2018/04/06)
- Sabina Gwachha; Bachelors in Nursing, “Training Workshop on Data Management and Analysis” (2019/12/29-2020/01/03)
- Sabina Gwachha; Bachelors in Nursing, “Training Workshop Scientific Research Communication and Publication” (2020/01/19-2020/01/21)
- Shital Shakya; Bachelors in Pharmacy; “Training Workshop on Health Research Proposal Development and Research Management”, (2019/12/22-2019/12/27).
- Shital Shakya; Bachelors in Pharmacy; “Training Workshop on Data Management and Analysis”, (2019/12/29-2020/01/03).
- Amit Khanal BSc (Microbiology): Training on “Certificate course In ART” (Human Assisted Reproductive Technology), (2021/03/08-2021/03/22)- EART, Mumbai, India.

Creator's IVF Nepal further provides opportunity for staff to pursue their studies while in their job. In this connection, we have shared some portion of fees of following staffs to pursue their Bachelor's degree in Nursing:

- A) Ms. Sabina Gwachha
- B) Ms. Khusbu Adhikari
- C) Ms. Reena Khjaju (On going)

3.4 Major Milestones and Achievements

Remarkable moments:

26th August 2015- Beginning the service of Creator`s IVF Nepal itself in tough time as stated above itself was a challenge in itself. Operating the centre in such difficult time with satisfaction to the patients in itself can be considered as remarkable moment.

Our service(s) to the patients, and they being satisfied with our service has always been factor of motivation. Some of noteworthy mentions by our patients has always been remarkable for us; an example - "We would like to thank all the staff and doctors at Creator`s IVF Nepal for making our dream of being parents come true. Without your help it wouldn`t have been possible. Now we have a beautiful and healthy son. Thanks to you all from bottom of our hearts." -Mr. and Mrs. Cochlin (Live in USA).

2019 - In an effort towards the comprehensive development of sector Creator`s IVF Nepal has trained one Gynecologist Dr. Lakshmi Sunar in field of ART. Dr. Sunar is preparing to start IVF centre in Pokhara.

Milestones and Acievements:

In last five years (2015-2020) of our operations there were many memorable, key events that could be milestones in history of Creator`s IVF Nepal in days to come and some are stated as below :

- 8 Poush 2072 (23 December 2015) - First IVF Batch
- 17 Bhadra 2073 (2 September 2016) - Delivery of our first IVF baby ShristiShrijana Lama
- 27 Chaitra 2072 (9 April 2016) - First ICSI Batch
- 30 Mangsir 2073 (16 November 2016) - Delivery of Our first ICSI baby
- 25 Shrawan 2074 (9 August 2017) - Regular IVF service
- Jestha 2075 (May 2018) - Delivery of Our first IVF babies (twin) by Regular IVF treatment
- CREATOR`S IVF NEPAL: Started embryo reduction
 - 17 Bhadra 2075 (2 September 2018) - First abdominal embryo reduction
 - 4 Magh 2075 (18 January 2019) - First transvaginal embryo reduction
- 15 Falgun 2075 (27 February 2019) - Fertility preservation for cancer patients



4. Feelings / Association with Creator`s IVF Nepal Pvt. Ltd. – Staffs etc.

Experience of clinical embryologist/visiting consultant embryologist

A. Visiting Consultant Embryologist

I feel proud and privileged to sum up my association with Dr Sanu Maiya Shrestha, the Gynecologist & Leading Infertility specialist of Nepal. My interaction with her dates back as early as 2004 and subsequently swelled as time passed by. Apart from her humble nature, friendly disposition and a motherly approach, she is an amalgamation of ideal characteristics which a patient desperately seeks in a doctor. Abound by knowledge, skill, an unending thirst of progressing and forging ahead in the challenging field of infertility she has that humane touch which reimposes a sense of faith and trust amongst her patients. Her command in infertility stands second to none. Her stay in Australia for advanced studies during which she submitted her thesis and obtained that extra wealth of knowledge, all are an example of standing proof of love towards the field of infertility. Her determination of forging ahead single handedly is quite evident when she took over the reins and established her own Infertility centre, initially at Global hospital and then a much-advanced state of the art lab "Creator's IVF

"was given shape!!

Her hard work has been bearing fruits since then as is evident from the innumerable smiles she has brought on the faces of those unfortunate couples who thought that they had lost the battle with infertility. She singles handedly has brought Creators to towering heights. Transparent to the core, she follows the rules to the last tee and her approach is totally ethical. Supported by her family members and a young dynamic hospital and laboratory team all working like well-oiled machines she has won many a difficult battle during the traumatic days of earthquake and the pandemic. A young dynamic doctor with never say die attitude albeit has won and will be winning many a battle on this field. The blessings and accolades she has been bestowed with all are par excellence.

I consider myself really lucky to be associated with her and I wish her years of towering success in her life.

-Dr. Kersi Meherji Avari

B. Clinical embryologist

Creator`s IVF Nepal (CIVF Nepal), as the name suggests has been helping sub-fertile couples, create new life with the help of Assisted Reproductive Techniques like In-Vitro Fertilisation (IVF). The vision of this organisation (seed) budded from the time. Dr. Sanu Maiya Shrestha returned back from Australia after completing her Master's Degree in Assisted Reproduction. It took years of hardship and experience to make this vision come true. Step by step, the platform was being set for the seed to be sowed.

Personally, I became part of this vision since 2013. As part of it, my role as an embryologist in conjunction with other member of IVF team was very much sought after. It was not just a job for me at the beginning, it was a step towards my future. Choosing this field in my Master's Degree course helped me align my career and eventually benefited the seed to grow further.

After days of discussions and planning, the seed was sowed. It was a difficult time at the beginning for Creator`s IVF Nepal to grow from the situation generated at that time. But it was determined to sprout out as the roots were held tight from the foundation. We had a strong belief that this seed would grow and fruit. We introduced several new techniques for the bud to sprout lots of branches, leaves and helped it become a full-grown plant. What was initially a small core team of IVF Nepal, later on grew to a much larger core team of Creator`s IVF Nepal. All of us, nurtured this plant very well. And today we are reaping the fruits.

-Mr. Dijan Vaidya

C. Junior Consultant Gynecologist/ART specialist

It has been more than a year I have joined Creator's IVF Nepal. I too was hard hit by the catastrophic effects of Covid -19 pandemic. I was on the top of the world as I was approaching towards the end of my Fellowship course in Reproductive Endocrinology in Guwahati, India.

The uncertain lockdown imposed in February 2020 and the indefinite closure of Nepal-India border made me so desperate and miserable, it forced me to ponder whether if I would ever be back to Nepal.

I was in constant telephonic contact with respectable SanuMaiya Ma'am's ever encouraging words always made me believe one or the other day I will be back home.

1st June 2020, with my mother and small daughter, I entered Nepal through a heavily guarded Indo-Nepal (Kakarbhitta) border. Perhaps, an experience similar to a refugee entering own motherland.

After self-isolating for two weeks, I joined Creator`s IVF Nepal. Sanu Ma'am has always made me feel part

Creator`s IVF Nepal team. As my week progressed, so did my capabilities I grew more confident in the tasks I was asked to perform.

My motivation to study Infertility comes from the desire to combine my interest in the ever-expanding field of Reproductive Medicine. I will ever be grateful to Ma'am for allowing me to work at Creator`s IVF Nepal where I am implementing the theoretical knowledge I gained during my Fellowship into a more skillful, analytic practical exposure. Throughout, I have been expanding my confidence, communication skills with the opportunities to observe and develop various skills in Assisted Reproductive Technology.

So many couples are struggling with infertility. It is one of the life's most painful challenges because the drive to have a child is a core aspect of what makes us human. Being in part with Creator`s IVF Nepal hopefully I will be able to help the infertile section of Nepali community for nurturing their dreams and hope of having a beautiful child.

- Dr. Renee Pradhan

D. Nursing team

"Save one life you're HERO, save a hundred lives you're a NURSE". This saying denotes without any doubts that nursing is still one of the most inspiring and fulfilling careers ever created. Working as a nurse means devoting ourselves in the life that pauses barely ever. Too often we underestimate the power of touch, a smile, a kind word but actually these are the vital things in life we as a nurse possess in our caring profession. Nurses have to be patience with patient who are not patience.

Me myself Sabina Gwachha has been working as a nursing staff for 7 years in IVF Nepal at Global Hospital and for 5 years at Creator's IVF Nepal. I've been working as a nursing in-charge since 10 years now. Creator`s IVF Nepal is the second home of mine where I've learnt many creative and knowledgeable facts. We work as a family and have good team spirit which makes me feel so very proud.

This centre doesn't only require physical ability of the workers but also needs strong mental as well as emotional qualities. Additionally, we nursing staff have to deal with patients very gently and politely. This has definitely helped we nursing staffs to tackle the emotional challenges

Even we feel frustrated, we have to act nicely and deal with patient. Despite of good care, hard work, and dedication we don't get payback and appreciation. Nursing is not for everyone. It takes a very strong, intelligent and compassionate person to take on the ills of the world with passion and purpose. No wonder we're exhausted at the end of the day, we work to maintain the health and well-being of the patient.

We feel proud to be a nurse, not many people are capable of doing what we as a nurse do.

In this centre, the managing director and respected Dr. Sanu Maiya Shrestha (Pradhan) has played a role model for the nursing team. She has always motivated and supported us throughout the year and helped us with not only our professional but personal problem as well.

- Ms. Sabina Gwachha

E. Administrative Officer

Enrolled here as an administrative officer since 2017, Creator's has provided me with opportunities to grow and excel myself in terms of team management, documentation and taking a lead on carrying out the daily activities smoothly. Creator's has been more like a family and I feel good to be a part of the management team. I feel really good when my colleagues say that Creator's is their second home. Having an experience in education-oriented background, this field has been completely new to me as I got to explore about the health facilities and share my expertise as a part of this team.

I am extremely thankful to Dr. Sanu Maiya Shrestha and entire Human Resource Management team to help me become who I am today

-Ms. Sajana Shrestha

F. Pharmacist

Creator's has been like a roller coaster ride for me for the past three years. The amalgam of happy and sad moments has made this journey more beautiful and fuller of acknowledgements. Being here, there have been many moments that have helped me strengthen myself, gain more knowledge and taught me to be more accountable. The company of warm people around me with whom I get to work and learn new things every day has been a constant motivation. The constant guidance and support from my seniors have helped me nurture and flourish. With each new challenges coming across and passing by, I have learned to tackle different situations through various perspectives. Learning to be more empathetic, learning to accept the challenges and learning to love a little more has been my key achievements throughout this journey with Creator's.

For me, Creator's has been all about "Creating Happiness". I wish this family grows stronger, bigger and brighter with each passing day.

- Ms. Shital Shakya

G. Finance Manager

As a fresher when I joined Creator`s IVF Nepal back in 2015, I was completely new to this field. Everyone around me has always been friendly and close since the beginning, so I never felt like a stranger here. Starting from a fresher in the Finance department to this day where I handle the department and also train my junior regarding accounting system, I believe I have grown myself in terms of work experience and learning. The journey through this transition was definitely challenging and full of hurdles but I am extremely thankful towards my mentors who have constantly guided me to reach here. It has been amazing to have such a supportive team and I really feel privileged to be a part of Creator's family. I am glad that Creator's has been a platform to constantly help me learn and grow each day.

- Ms. Manita Maharjan

H. Receptionist / Cashier

My Creator's journey started when we were a part of "IVF Nepal" which dates back to 2013. I feel extremely overwhelmed to witness the journey of our organisation as it grew from "IVF Nepal" to "Creator's IVF Nepal". Along with the organisation, I believe that I have also grown in terms of dealing with the patients in a better way and carrying out my daily tasks. Handling the responsibilities of being a receptionist, cashier and a counselor for the patients, it often gets stressful for me and challenging to give justice to all the roles that I have to comprehend. But despite these challenges, I feel deeply honored when patients compliment me for being empathetic towards their cases and for being humble. I receive queries from the patients regarding my well-being and the reason of my absence when I am not seen in office, and that really keeps me motivated to constantly do better in my workplace. Along with the patients and the colleagues whom I work with, Creator's is more like a family and a second home where I can feel better and gain good spirit. I am extremely grateful towards the entire team of Creator's and I extend my best wishes for the organisation to grow further.

- Ms. Sophiya Pradhananga

CREATOR`S IVF NEPAL-Journey of Quality

Creator`s IVF Nepal Pvt. Ltd. (Creator`s IVF Nepal Nepal), name itself goes where dream of infertile couple for children, beauty of life, come into reality and with quality service. Starting of the journey with the goal of serving the infertile couple with utmost care, affordability, but riding the bandwagon of CREATOR'S IVF NEPAL Nepal has not been smooth in contrast to the expectation, leading towards the lots of despair, uncertainty in the very beginning. Internal challenges are always there for any kind of services, Creator`s IVF Nepal . Nepal is also not an exception, but in addition to those initial days of challenges was more of external factors, with political uncertainty blockade at border points in Southern Nepal and the machines imported for the CREATOR'S IVF NEPAL Nepal stuck for months at border point that led to despair, distress with days passing adding anxiety to team and more to the team leader.

Creator`s IVF Nepal came over the situation and as it gained the strength from that despair, where it was forced into, grew into the very tough nut that would not crack despite an extreme, adverse situation. With the passage of time, in a span of five years, CREATOR'S IVF NEPAL Nepal gained love and appreciation from its patients. Satisfaction that reflected in eyes of patients with innumerable smiles, often expressed with written statements, has always been motivation for the CREATOR`S IVF NEPAL team, and their

grueling team efforts has always played a vital role in this regard.

Creator`s IVF Nepal has gained much of organisational maturity along with the growth in its services. Germinated with the idea, dream of team leader, kicked off with small core team has now grown to sizeable number of members. Growth in services of an organisation and organisation itself is always beneficial for investors, staff members but growth of the services in the overall sector benefits the community and ultimately country, with this belief Creator`s IVF Nepal is moving with an objective towards the path of sustainability with development of manpower in the field of infertility.

Needless to say, Creator`s IVF Nepal under the dynamic, charismatic leadership backed by effective, pragmatic advisory and managerial roles, supported by dedicated, robust team members have been able to overcome the different upheavals in its five years of journey and stood firm in toughest of the times. With the glorious five years of service, Creator`s IVF Nepal is moving on the path quality service with affordability and the saying **Quality is Journey Not a Destination** holds very true for Creator`s IVF Nepal Pvt. Ltd.

- Mr. Rahish Lal Shrestha
Member, Board of Directors



5. Creative corner

My journey from MBBS to Gynecologist and then to IVF specialist in Creator`s IVF Nepal Pvt. Ltd.

Dr. Sanu Maiya Shrestha (Pradhan)

When I was in class five, I dreamt of becoming a "Doctor" and serving people. It seemed like, it was an impossible dream as I was born in a lower socioeconomic class family. Hence, I used to ask myself, "Will it be fulfilled?" My father, Mr. Prem Lal Shrestha was so determined to make one of his children a medical doctor. He used to encourage us to study hard to score high marks and get scholarship as he was not in a position to afford our studies privately. We all children (five sisters and one brother) understood his determination and we all worked hard and were good at studies. As a role model my elder sister, Sharada Shrestha was very good at studies and had received "Aishwarya Vidhya Padak" in Bachelor in Science from then Queen Aishwarya Rajya Laxmi Devi Shah and also "Tika Laxmi Padak". Aishwarya Vidhya Padak used to be given to those female students who had secured highest in the different educational faculties in whole Nepal. That was an encouragement to female students during our time. My elder sister made us proud and we followed her footsteps. I was in class 10 when she was awarded Aishwarya Vidhya Padak. I had promised myself that "I will also win that meda".

With my father's encouragement, I had never been second in my class since when I was in class two. I passed School Leaving Certificate (S. L. C) in first division in BS. 2036 although my teachers at school had expected me to be within Board 10th position. In those days, Nepal Government used to publish names of the first 10 students in Gorakhapatra (the National Daily News Paper), who had secured highest marks in S.L.C and called them "Board stood students". Most of the Board stood students were from Budhanilkantha School in my S.L.C batch, so the competition was tough for us as we were from government school where students were less exposed to quality education. After S.L.C, only myself from my school could pass through the entrance examination of the prestigious college, Amrit Science College (ASCOL) which was the number one college during those days. All the excellent students could only can enter ASCOL. In ASCOL, I chose Physics group. People used to ask why I got admitted in Physics group? At the time of joining Intermediate in Science (I.Sc.), I came to know that Indian government had stopped the Colombo plan scholarship for MBBS but continued for Engineering course. That time there

was no other scholarships available for MBBS. My wish of becoming a doctor deemed as I have already said I came from a low socioeconomic family background and there was no option for self finance for me to do MBBS. Hence, I changed my aim. I decided to study in Physics group and secure good marks to get scholarship for engineering course abroad, although my wish was to become a doctor.

My elder sister was very smart to advise me. She told me that if I choose Physics group, I can score higher marks and it will be easy to win scholarship for engineering. She also advised me to learn Russian language at Russian culture centre as at that time Russian Government was awarding scholarships for MBBS and engineering to those students who learn Russian language. Russian culture centre allowed us to apply in MBBS even though I studied in Physics group. My sister advised me to apply for MBBS from Russian Culture Centre. Russian culture centre used to select students for scholarships who secured good marks in Russian language and also with good academic records in their Intermediate Science (I.Sc.) level. So, I joined Russian language classes as advised by my elder sister. Russian language classes were free of cost. I joined Russian language with my elder sister. I was doing day time I Sc. in ASCOL and evening classes of Russian language hand in hand. As those days we had no other distractions like watching TV, internet surfing etc., we used to have plenty time for studies. I used to be very afraid in initial days of my I Sc. as my classmates were all from private schools (Budhanilkantha, Adarsha Vidhya Mandir, St. Xavier's school, St. Mary's school) with good knowledge of English language. Unfortunately, we from government school had very difficult time to understand lectures given in English for Physics, Chemistry, Biology etc. It took me few months to understand those lectures. I had to work hard to understand the lectures. I felt hard work leads to your destiny. I completed my first year I.Sc. and also first year Russian language course. In both, I secured highest rank (highest score in I Sc. among girls and highest in Russian language). I was myself surprised and pleased.

My second year I.Sc started as well as my second-year Russian language course. That year was also uneventful and as usual I secured good marks in both. So, my good academic certificate made easy for me to apply for scholarship in MBBS in Ex- USSR from Russian culture centre. I was also selected for Colombo Plan Scholarship in Architect engineering from the government side. In fact, my father felt very

insecure to send me to India for higher studies. He used to feel that daughters were not safe in India. So, he wanted me to go to either China or Russia as they were communist countries. My father's thought was that females are protected in communist countries. I applied for the scholarship for MBBS studies in Ex-USSR. I was still not sure whether I will receive positive answer for MBBS studies. So, I waited till the confirmation of MBBS scholarship from Russian culture centre. I left Colombo plan scholarship as soon as my Scholarship for MBBS was confirmed. Finally, my wish to become a doctor was confirmed to be fulfilled. I thank God for the destiny he planned for me. I flew to Ex-USSR to do my MBBS in August 1984. While I was in Ex-USSR, I was informed that I had been awarded Aishworya Vidhya Padak as a highest scorer female student from science faculty in whole Nepal. I was so proud, that I was successful in following my elder sister's footsteps. As I had already flown to USSR, I could not receive the medal from then Queen Aishwarya's hand. My proud father went to the Ministry of Education to collect my medal.

When I reached Moscow I felt that I saw heaven in the real world. My preparatory course was in Rostov-Na-Danu, Ex-USSR. Preparatory course was to teach us Russian language as well as all the basic science subjects in Russian language. When I recall my preparatory course in Rostov, I remember how detailed teaching was of all subjects in Russian language. First time in my life I learned "you do not have to memorize the formulas even of Mathematics". I learned for the first time the derivation of formulas and not required to remember by heart, like we used to do in Nepali education system. The quality of education in Russia was far better than what I had in Nepal. I was very happy that I chose Ex-USSR for my MBBS studies. I completed my one-year preparatory course and then started MBBS first year. I went to Minsk State Medical Institute for my MBBS course. We used to have 6 years course of MBBS. It was amazing that you have lots of facilities to gain knowledge in the corresponding faculty in the institute. You can easily find monographs of a single disease if you have difficulty in understanding. There was such a system that if you are a good hard-working student, you get lots of gateways to gain knowledge. It was so amazing. I completed my MBBS from Minsk State Medical Institute with First Division and came back to my motherland Nepal in 1991.

First year post MBBS in Nepal was a bit depressing experience due to the language problem while practicing in Bir Hospital, Kathmandu. I had learned full MBBS course in Russian language and now in hospitals of Nepal, we had to practice medicine in English language. It took me about three months to

adopt myself in the English system in Nepalese Hospitals. First three months I worked in Bir Hospital Surgical Department with Dr. Dhurba Mudvari. Then I shifted to Paropakar Maternity Hospital (Prashuti Ghriha), Kathmandu. One thing I learned was, if you have a basic knowledge of medicine in any language, you will not have problem to get into the system in another known language. After two years of practice in hospitals in Nepal I decided to do Post-graduation in Obstetrics and Gynecology.

In 1994 I sat for Part I MRCOG (Membership of Royal College of Obstetrics and Gynecology, United Kingdom) examination and also the entrance exam DGO (Diploma in Obstetrics and Gynecology) in Tribhuvan University Teaching Hospital (TUTH), Kathmandu. I passed both of them. I started my one-year DGO course at TUTH. At the end of DGO, in 1995 February, I got married to Mr. Tribeni Man Singha Pradhan, Highway Engineer, a Graduate from Ex-USSR. I completed my DGO in 1995 April. After completion of my DGO I started to fulfill the criteria for MRCOG part II. Simultaneously, I was also trying to conceive. But unfortunately, I had difficulty in conceiving. I subjected myself as a subfertility patient and was getting treatment from a renowned gynecologist. I could not conceive in my subfertility treatment. Unfortunately, that time there was no such Fertility Specialists available. Infertility treatments used to be very conventional and blind. Since my gynecologist was unsuccessful in my subfertility treatment I decided and changed my treating doctor. While I was getting treatment for subfertility, I was also trying for Double Ended Sponsorship Scheme to do my MRCOG part II. Fortunately, I conceived and also got the confirmation for MRCOG part II in Liverpool Hospital in UK in 1997. This was a challenge for me what to accept; further studies of MRCOG part II in UK or to have a baby. My sponsor consultant doctor for MRCOG part II, (Late) Prof Dr. June Thapa told me that I had to choose one, either to have a baby or to take MRCOG part II studies in UK. It was difficult for me to decide. It took me 15 days to decide and I finally decided to postpone my MRCOG part II studies and continue my pregnancy. I was 8 weeks of pregnant when I decided to postpone the studies of MRCOG part II. I thought I had done the right decision. I counselled myself that I can study even in my sixties but should have baby now.

Unfortunately, I lost my pregnancy at 12 weeks. So, my both hands went empty. I lost both chances. I thought if I could conceive earlier just after marriage, I would have got both. This made me so depressed and made me take the determination that I will learn subfertility treatment while I will be doing my MRCOG part II. It was my bad luck that I then could not get second

chance for MRCOG part II immediately as the regulations of Royal College of Obstetricians and Gynecologists (RCOG) had been changed. RCOG had stopped Double Ended Sponsorship Scheme for MRCOG part II. According to new regulations of RCOG, I had to get through IELTS exam prior to join MRCOG part II. I had to score seven in each item, speaking, writing, reading and listening of British English. Since I was educated in government school, my English language level was not in that level. But I worked hard to get through it. During my preparation for IELTS, I conceived for the second time naturally. It was about 9 months after my first miscarriage. In my whole pregnancy as well as post-delivery I was sitting for IELTS repeatedly. I delivered my first baby daughter in June 1998. By the time I scored adequate in IELTS, RCOG regulations again had been changed. RCOG stopped to take overseas students for MRCOG Part II for the time being. But I always thought positively "everything happens for a betterment".

It was in 2001 when for the first time in Nepal Aus - AID scholarship for Masters Degree was published for free competition. I was qualified for that scholarship. In the earlier years this Aus AID scholarship used to be offered to only government officers. So as a free competitor I won Aus AID Scholarship to study Masters in Obstetrics and Gynecology by Research in University of New South Wales (UNSW), Sydney, Australia. During my Masters study in UNSW, I learned Assisted Reproductive Technology (ART) in depth and I completed my thesis on the topic "Longitudinal assessment of ovarian and endometrial vascularity by Power Doppler Ultrasound during spontaneous and stimulated ovarian cycles in Assisted Reproductive Technology". The outcome of my thesis helped many infertile women in Royal Hospital for Women, Sydney, who had failed in multiple previous cycles of In Vitro Fertilization (IVF) treatment. Thus, I performed my Masters studies excellently and as a result I received a chance to go ahead with Ph.D studies in the same subject. But this was not possible immediately as I had signed a contract while I received Aus AID scholarship, that after completion of Masters I had to serve my home country for two years. Hence, I promised my teachers in Australia that I will come back after two years to continue my Ph.D studies.

In fact, while I was studying in Australia I used to worry a lot that whether the knowledge that I gained in Australia will be useful in Nepal as the technology in Nepal was so backward and there were no such ART centres where I could practice. I used to chat with my brother Rahish Lal Shrestha expressing my worries. He used to console me saying "Didi its good that you have learned new technology you, can start your own ART centre in Nepal and that will be a good starting".

This was his immature advice not being able to analyze how difficult it is in Nepal to start on your own. Anyway, his advice kept me boosted and kept myself satisfied. I think, two months earlier to my arrival to Nepal, one of my colleagues, Dr. Chanda Karki informed me that Om Hospital was going to start IVF centre in Nepal. I was so happy and I shared this news with my husband. I left Australia in February 2004 after completing my Masters and came back to Nepal.

As soon as I arrived Kathmandu, Nepal, I heard that Om IVF centre construction was going to happen. On my arrival, Dr. Chanda Karki only informed me that a Workshop in Infertility by the Indian expert Dr. Rishikesh Pai and his team is going to happen and she invited me to that workshop. During this workshop, Dr. Chanda introduced me to Dr. Bhola Rijal stating "Doctor this is Dr. Sanu. She will be useful for you in future". Dr. Rijal was so nice to me and we greeted each other. This was my first meeting with Dr. Rijal personally as I never had got a chance to meet him earlier when I was in Nepal prior to my Australia studies. In the same workshop I also had a chance to meet Dr. Rishikesh Pai. I introduced to him and also came to know that he had done his ART course from Melbourne IVF centre, Australia.

It took me about fifteen days to settle down in Kathmandu, Nepal after coming back from Australia. I started to hunt jobs. I called Dr. Uma Shrivastav as she had her own Infertility centre. I had spoken to her for about one hour and concluded that I will not be able to work in her centre as she demanded me to bring my own ultrasound (USG) machine. I was not in the condition that I could invest finance. I was ready to invest my knowledge but not the finance. I was not in that status. I even did not know well whether she had been doing IVF treatment successfully or not at that time. Simultaneously, I was preparing my application for Om IVF centre stating my enormous interest and about my gained knowledge in ART. I personally dropped the application to Dr. Bhola Rijal and expressed my genuine interest working at Om IVF Centre. He told me to leave the application and to wait for the call. As the construction of Om IVF centre was still on the way, I did not get job immediately. I waited for two weeks and then left hope.

Then I had to search a job other than related to ART field. I also had learned research methodology very well in Australia. I thought I should join in the academic field in guiding student's thesis. While doing my Masters in Australia I learned very well about research methodology, thesis writing and also the statistical analysis of medical data. So, I decided to meet Prof. Dr. Dibyashree Malla who was the Academic Coordinator of MD in Obstetrics/Gynecology course at Prashuti Ghriha. I

met her and explained about my course in Australia. She told me to bring my thesis and drop an application. I did so and in few days, she called me to join as an Academic Registrar. She also handed me five students of MD Obs/Gyne to guide their thesis. Finally, after about one month of my arrival to Kathmandu, Nepal, I got job at Prashuti Griha as an Academic Registrar. My duty hour was from 9 am to 5pm with the salary Rs.10,000 per month. Considering my financial difficulty Dr. Malla increased my salary to Rs.20,000 per month. That made me easy to survive as my husband was also searching job and I had to manage my daughter's school fees as well as the rented house payments. I am really grateful to Dr. Malla for understanding my situation that time. I continued to work with Dr. Malla and I enjoyed working with her and guiding thesis of MD students.

One month went very smoothly at Prashuti Griha . I heard that construction of Om IVF Centre completed and first batch of IVF was planned. I was wishing that I will get call from Dr. Bhola Rijal to join there. Unfortunately, I did not get any information. So, I thought I will remain in Prashuti and will do what I can. I even planned inside me that I should do something in Prashuti Griha It was not easy in government set up to create something. The chronic system of Prasuti Griha was not going to change in one day, I felt analyzing the system. Consultant doctors and management were stuck in minor problems. Probably I was also immature to explain all what I had learned. I must confess I had no idea about the ART treatments done in developing countries like Nepal and India. The system in Australia was completely different. All of a sudden Dr. Bhola Rijal called me and told me to join Om IVF centre. I told him I had already joined Prashuti Griha. It was happy news for me as well as a sad news as I had already committed to Dr. Malla that I will be working with her. I remember she told me "I wish you will work here for a long time and do not change your mind". Stating this she also took me around the statue of Lord Krishna in Prasuti Griha in front of the garden. Then I had a challenging situation ,what I should do? Actually, I wanted to join Om IVF centre so that I could practice ART treatments, on the other hand I also did not want to deceive Dr. Malla. I was so afraid to tell Dr. Malla that I wanted to leave Prashuti. I did that through Dr. Achala Vaidya, who was the Consultant of the group where I worked. Finally, Dr. Malla allowed me to do so in one condition. She told me I had to work for three months in total and I should help those five students in completing their thesis upto the result section. I helped all those students to complete their thesis and present in front of the consultants. I remember one of the students from Maldives used to come to Om IVF centre to get help from me for data analysis specially to perform X2 Test. I used to be very

good in statistical analysis in SPSS.

I called Dr. Rijal that I can join Om IVF centre only two months later after completing Dr. Malla's commitment. Dr. Rijal then told me to join as a part time consultant immediately as they were having problem in IVF treatment stimulation monitoring for the first batch. This first batch was assigned to the consultants from India Dr. Narendra Malhotra and Dr Jaydeep Malhotra and they had given the stimulation protocols in written for each patient in detail. They were giving distance consultation during the stimulation time. All the sixteen patients of the first batch were given injections for pituitary downregulation. The time came to check, whether patients were downregulated or not. When the hormone reports of patients and the findings of Transvaginal Sonography (TVS) were not matching, consultants from India were in a difficult situation to start stimulation. Then I was requested to come to Om Hospital for the TVS monitoring of those stimulated patients. I went to Om Hospital for about five times for the monitoring of those sixteen patients of the first batch as a part time consultant. I went to Om Hospital after 5 pm only as I was working at Prashuti till 5 pm. Dr. Narendra Malhotra and Dr. Jaydeep Malhotra came for ovum pick up, embryology part till embryo transfer for 4 to 5 days. I was not involved in those procedures in the first batch as I still had another 10 days to complete my three months period at Prashuti with Dr. Malla. From nearly second week of June, I joined Om Hospital as a full time consultant. I had difficult time in leaving Dr. Malla's team. I remember, I cried in front of Dr. Achala Vaidya, expressing I wanted to continue in Prashuti too as I loved to help MD students in thesis writing. I could not get both in the same set up. I wished there was an IVF centre in Prashuti Griha too. Finally, I had to leave Prashuti Griha and Dr. Malla's team.

I joined Om IVF Centre. I was welcomed by Dr. Bhola Rijal very positively. In the time when I joined Om IVF centre, the first batch of IVF was completed and the result of that batch was due. So I was instructed to recruit patients for the second batch of IVF. So, I started to recruit patients for second batch IVF, then so on I started to work in Om IVF centre. First year in Om IVF centre was very busy and exciting. I started doing TVS of infertility patients. I started doing TVS of Intrauterine Insemination (IUI) and IVF patients for stimulation monitoring. Initially it was difficult for me to do TVS in Radiology department as there was no USG machine in IVF separately. After few weeks Dr. Rijal realized that there should be one USG machine in IVF too. So, in a one month time USG machine was purchased for IVF and specially for my operation. Then I became very busy doing TVS of all infertility patients and communicating Dr. Malhotra regarding

IVF stimulations. We used to make the patients ready for IVF batch till ovum pick up. Dr Malhotra used to come for ovum pick up and embryo transfer. So, my first year went very busy. Om IVF centre was the only infertility centre in the country at that time. So, there were lots of patients referred from other hospitals .

Second year, Om Hospital experience was even more exciting as I was getting chances to do ovum pick up too. I learned batch IVF in Om IVF centre with Dr. Malhotra. In Australia I had learned regular IVF and protocols in a different standardized way. My third year in Om IVF centre was little depressing as I wanted to go ahead differently which was not possible in Om IVF centre at that time. Whenever I tried to leave Om IVF centre my husband always stopped me and counselled me saying “proper time will come when you can start on your own. It is not yet time to leave.” He always encouraged me to learn management part prior leaving Om IVF centre. Finally at the end of third year of working at Om IVF centre, I decided to quit the job. There were many other reasons why I was not feeling comfortable in Om Hospital. I will explain this in detail sometimes later. I am very thankful to Dr. Bhola Rijal for giving me a chance to work in Om IVF centre, otherwise knowledge that I had gained in Australia would have died in infancy.

I was looking for different opportunities where I could apply my gained knowledge independently. Fortunately, I was requested by Dr. Gyanendra Karki in his new hospital Global Hospital, Gwarko, Lalitpur, to start IVF centre. Myself and my husband went to see Dr. Karki who was my senior when we studied MBBS in Ex-USSR. He seemed very helpful. Hence, I decided to take this opportunity. He financed to build IVF centre in his new hospital and arranged an embryologist from India. So, I started IVF centre in Global hospital in my solo leadership. I named it IVF Nepal Pvt. Ltd. This name was chosen by me as I was trained in IVF Australia. Unlike “IVF Australia”, “IVF Nepal” was generated on my own. Here I started batch IVF. My aim was not batch IVF but regular IVF as treatments are compromised in Batch. I planned to make a team ready to go ahead with regular IVF. The main manpower that consumes time to develop, is a skilled embryologist. That time there was still no embryologist in Nepal and Indian embryologist used to visit for IVF batch. Unless you have an In-house embryologist, you cannot conduct regular IVF. So, my first aim was to develop this manpower. I tried to convince so many people with related degree who came in my contact to get trained in embryology. In fact, people had very less awareness about this carrier. Hence, I had difficulty in finding a proper candidate for the embryology training. It took me almost four years to find a proper candidate. Finally, I could convince a guy (Mr. Dijan

Vaidya) who came to me as medical representative (MR) for Hormone medicines. Mr. Dijan Vaidya had completed Bachelor in Human Biology. I thought I found someone whom I can train in embryology. After few conversations, he was convinced and became ready to work with me. So, I took him in IVF Nepal Pvt. Ltd as a lab assistant. He became determined to get trained in embryology and I encouraged him similarly. The first embryologist (Mr. Deene Bishnukantha) who used to come to our lab in Global Hospital was very reluctant to transfer his skill to Dijan. So, I decided to send him to India Shivani Scientific Industries Pvt. Ltd, EART, Mumbai for training in embryology. Fortunately, Dijan was trained by Dr. Kersi Avari with whom I was introduced in Om IVF centre. I was conducting IVF batches with Denee Vishnukantha and felt that I could no longer work with him. I decided to change the embryologist. I requested Dr. Kersi Avari to be as a consultant at our IVF centre. He agreed to be so. The last two years in IVF Nepal Pvt. Ltd, I conducted IVF batches with Dr. Kersi Avari whom Dijan used to assist.

In total I worked in IVF Nepal Pvt Ltd. for seven years (2007 – 2015) and conducted 50 batches of IVF. I had to face lots of management difficulties in IVF Nepal in the later time as the management team of Global hospital was changed. There was no more Dr. Karki in the management team in Global hospital. New management team of Global hospital was making me very difficult to survive. They wanted me to leave the floor where IVF Nepal was set. This time my husband had already flown to UK for his better opportunity of job and I used to pour my stress in telephone. He used to calm me down but distance counselling was not enough. So, I decided to move to UK with my kids. I also explored in UK the opportunity for me. But I did not see any better opportunity in my carrier. So, my husband encouraged me to remain in Nepal and start own IVF centre. He promised to join me later in Nepal as soon as the situation of family normalizes as our elder daughter was just settling for her higher studies in UK. In 2014 January I visited UK to see my husband and elder daughter. That time I with my husband discussed very seriously and came to the conclusion that we should start an IVF centre in Nepal on our own. That was not an easy step as we had limited resources to invest. So, we thought of taking bank loan with collateral of our property to come over this problem.

I came back from UK and opened my guts to go ahead to start new IVF centre where I could do regular IVF. So, we started planning and preparing the project. Almost every day I used to communicate with my husband while planning. His mastermind plan worked well and I went ahead according to his advices. First of all, we did market analysis. A report with market

analysis and financial planning was prepared by one of my patients Mr. T N Acharya. On top of this I received strong back up from Dr. Kersi Avari and Shivani Scientific Industries specially Mr. Ashish Modi. We registered new company under the name “Creator`s IVF Nepal Pvt. Ltd”. We developed new logo for the organization. Logo was developed in UK by my elder daughter Trisha and husband together. The name Creator was advised by my husband and elder daughter. Lots of effort was given to develop this logo. My elder daughter was doing her A level in UK that time. We worked so hard to set the new centre together. I should not forget to mention here my brother Rahish Lal Shrestha, Ms. Shrijana Rana and Mr. Dijan Vaidya who supported me in every step from searching rental space, managing paper works and finalizing bank loans and starting the centre construction. All my old staffs from Global hospital who remained with me were strong back bones. Mental and emotional support that I got from my parents, husband and my two daughters (Trisha and Shristi) had driven me to the successful completion of this project.

My husband always encouraged me to develop qualified own Nepali IVF Specialist Team. So, in the mean time I encouraged Mr. Dijan Vaidya to pursue an academic degree in Embryology. We wanted to make our new centre with a fully qualified IVF specialist team. Fortunately, he got chance to study Masters in Clinical Embryology in Dundee University, UK. He flew to UK in August 2014. The rest of the team here in Nepal was going ahead with constructing new centre and managing bank loans, purchasing equipments etc. In the meantime, my husband came from UK for three months to help me. Finally, we completed our centre's construction, put the equipment purchase order. We also received the final approval to start from Janaswatha, Lalitpur. Meanwhile I was conducting treatments for the patients in IVF Nepal Pvt. Ltd. We also completed our entry Puja in our new organization. We were waiting for the arrival of our new equipments. After entry puja, my husband returned back to UK. Unfortunately, the 2014 blockade in Nepal India border did not allow our equipments to enter Nepal from the Indian side. The blockade continued months and months. That was such a difficult time for me I will never ever forget.

“What should I do”? I was stressed out extremely. I had already left Global Hospital rental space and had informed patients to come to Creators IVF Nepal for the treatment. Without equipments there was no chance to start the treatment. Then I had no other option rather than requesting Dr. Karki to lend his equipments from IVF Nepal Pvt. Ltd. In this difficult time Dr. Karki agreed to lend me his equipments till the

time new equipments arrived. Then I slept in peace. I started treatments from December 2015 in the new organization, Creators IVF Nepal Pvt. Ltd. Initially I started Batch IVF as I still had an embryologist coming from India and Dijan was still studying in UK. After 6 months, finally our new equipments arrived and all were properly assembled.

Dijan came back from UK after completing Masters in Clinical Embryology in 2016. For about one year I did not let him practice embryology independently. He worked under the supervision of Dr. Kersi Avari for certain batches. Once he felt confident, we started regular IVF batches. So, our Regular IVF treatment was started from 2017. Now we can claim that we have a fully qualified Nepalese IVF specialist team in Creator`s IVF Nepal Pvt. Ltd. We are the first in the country with fully qualified IVF specialist team. We assign different IVF protocols for different patients as per their requirements. Regular IVF has immense success rate. In our centre we do IVF only in indicated cases. We assign infertility treatment according to the cause of infertility and we start with basic treatment to advanced treatment. We found our patients in great satisfaction and as well as the whole team. Our aim is to provide ART treatment with transparency, honesty and with advanced technology.

It took us full 13 to 14 years to fulfill our dream project that I had thought of when I came back from Australia. Finally, we have been successful in establishing this organization, “Creator`s IVF Nepal Pvt. Ltd.” on our own. Now it is already five years completed from the establishment. During these five years, we faced many problems but when you have good team spirit everything eases. Since the establishment till now, Creator`s IVF Nepal have served more than 3000 infertile couples. We have performed more than 700 cycles of IVF and we have “Take Home Baby Rate” of 33.3% in IVF treatment. The happiest moment I should share is finally my husband Mr. Tribeni Man Singha Pradhan joining Creator`s IVF Nepal physically as the Chief Executive Officer (CEO). By profession he is a highway engineer but his deep knowledge in Management advances Creators IVF Nepal in further steps. He has been dedicated to smoothen every corner of the management aspect. We can feel of more team spirit at Creator's IVF Nepal. We, the whole team is ahead to serve Nepalese infertile couple with prime dedication. It would have been easier if our Government health system understood the need of such centre and had encouraged the specialists of this field. It was a real challenge to start a private organization in Nepal with my own effort.

“सन्तान सुख”

कथा १:

वि.सं. २०७२ साल बैशाख १२ गतेको त्यो कहालीलाग्दो भुइँचालो रामकृष्णको मानसपटलमा अझै पनि ताजा छ । शनिवारको त्यो कालो दिन काठमाडौँ शहर निकै डरलाग्दो पाराले हल्लिरहयो । बजारबाट हतारिदै रामकृष्ण आफ्नो कपनको घर आइपुग्दा सम्म, उनको त्यो सानो संसार सदाको लागि उज्जाड भइसकेको थियो । घरको छत खस्दा उनको श्रीमती र एउटै छोरो सुमन कहिल्यै नफर्कने गरी धर्तीबाट अल्विदा भइसकेको थियो । उता भक्तपुरकी रमाले आफ्नो आमा, बुवा र एक्लो भाई एकपलमा नै हराइसकेकी थिइन । विनाशकारी महाभुकम्पले एक्लैएका रामकृष्ण र रमालाई विधिले बाँधिदिएको छ ।

अधुरो रहेको रमा र रामकृष्णको परिवार, छ वर्ष पछि पूर्ण हुन लागेको छ । चालिस वर्षकी रमा टेस्ट ट्युब बेबी (Test Tube Baby) प्रविधिबाट अहिले तीन महिनाको गर्भवती छिन । रामकृष्ण फुरुङ्ग छन् ।

कथा: २

रामेछापका इन्दिरा र हरिको विवाह भएको बीस वर्ष पछि, आठतिस वर्षकी इन्दिरा अबका केही हप्तामा आमा बन्ने छिन् । आमा बुबा बन्ने लहदमा दुबै जना आनन्दित छन । दुबै नली बन्ध भएकी इन्दिरा, आइ. भि. एफ. (In- Vitro Fertilization- IVF) प्रकृयाबाट अब सन्तान प्राप्तीको बाटोमा उन्मुख छिन् ।

कथा: ३

गीता र देवेन्द्रको परिवार निकै सुखमय थियो । नानी सान्धी र बाबु लक्किको चुलबुले परिवार चिटिक पारेको फोटो फ्रेममा निकै लोभलाग्दो देखिन्थ्यो । तर दैवको लीला उदेक लाग्दो रहेछ । Mucopolysaccharidosis Type- 1, एक प्रकारको वंशानुगत रोगका कारण बाबु लक्किलाई पाँच वर्षको कलकलाउँदो उमेरमा देवले चुँडेर लग्यो । गीता, देवेन्द्र र नानी सान्धी मानसिक रूपमा वीछिप्ट भएका छन् ।

दुवै चोटि शल्यकृयाबाट सुत्केरी भएकी गीताको दोस्रो चोटि शल्यकृयामा नलीको बन्ध्याकरण भइसकेकोले अझ उनीहरूमा थप चिन्ता थपिएको थियो । तर IVF टेक्नोलोजिबाट, खोसिएका लक्किको शून्यतालाई फेरी जीवन दिन सकिने रहेछ भनी परामर्श पाएका गीता र देवेन्द्रमा केही आशाका ल्यान्दा पलाएको छ । फेरी जिन्दगीलाई पटरीमा ल्याउन, उनीहरू अब भाद्रबाट IVF उपचारमा आउने छन् ।

यी माथि उल्लेखित समाजका केही पात्रहरू मात्र हुन

एक दम्पतिय जीवनमा सन्तान सुख ईश्वरीय वरदान हो । बालकको निश्चल हाँसे र रोदनले त्यो जोडीलाई अलौकिक आनन्द दिन्छ । आमा बन्नु सबै विवाहित महिलाको सपना हो ।

निसन्तान अथवा बाँझोपन, एक अवस्था हो, जसमा एक दम्पति कम्तिमा एक वर्ष सम्मको अस्थायी साधनबिनाको नियमित यौन सम्बन्धबाट पनि सन्तान उत्पादन गर्न असमर्थ हुन्छन् ।

प्राचीन समय देखि अहिलेको दशकसम्म हाम्रो समाजमा बाँझोपन एक निराशा तथा शून्यताको पर्यायवाची झैं भई आएको छ । सन्तान रहित त्यस दम्पतिमा चरम मानसिक तनाव र त्यसको दबदबाहतबाट महिला हिंसा तथा बहुविवाह जस्ता सामाजिक बरबरतालाई निम्त्याएको छ । तथ्यांक अनुसार लगभग तेर देखि पन्द्र प्रतिशत विवाहित महिला तथा पुरुष यस बाँझोपन अवस्थाबाट गुर्जिरहेका हुन्छन् ।

२५ जुलाई १९७८, संसारको पहिलो आइ. भि. एफ. बेबी लुइस ब्राउनको जन्म बेलाइतको मेनचेस्टर शहरमा भएको थियो । लुइसकी आमाको बन्धु नलीका कारण सन्तान प्राप्तिमा समस्या आएको थियो । लुइसको जन्मलाई चिकित्सा शास्त्र सम्बन्धि कृत्रीम गर्भधारण क्षेत्रको (Assisted Reproductive Technology – ART) शताब्दिकै ठुलो उपलब्धिको रूपमा लिइएको छ । सर्जन प्यात्रिक स्तेपटो (Patrick Steptoe), फिजियोलोजिस्ट सर रोबर्ट एडवार्ड (Robert Edward) तथा इम्ब्रियोलोजिस्ट जीन पुरदी (Jean Purdy) का संयुक्त अथक प्रयास तथा अनुसन्धानबाट जन्म भएकी लुइस जोयले विश्वका थुप्रै निसन्तान

जोडीलाई ठुलो आशा देखाएको छ ।

आधुनिक विज्ञानको ठुलो उपज आइ. भि. एफ. टेक्नोलोजीका विभिन्न किसिमका प्रविधिले आज जोकोही महिला पनि आमा बन्ने आफ्नो प्राकृतिक नैसर्गिक अधिकारबाट बन्धित हुन पर्दैन । एक महिला तब गर्भधारण गर्न सकिन्छ, जब उनको पुरुषको वीर्यको गुण तथा उनको पाथेघर, दिम्ब तथा नलीको अवस्था, वैज्ञानिक मापदण्ड अनुसार स्वास्थ्यकर हुन्छ । यदि महिला वा पुरुष, कोही मध्यमा समस्या भए, बच्चा पाउन निकै गाह्रो पर्छ । कुनै दम्पतिमा सबै तत्वहरू सही रहेतापनि महिला गर्भवती हुन सकिरहेको हुँदैन ।

तर आज, ART जगतमा, समयले काचुली फेरिसकेको छ । ART को क्षेत्रमा भई रहेको निरन्तर वैज्ञानिक अन्वेषणबाट महिला तथा पुरुषको समस्या अनुसार आवश्यकता अनुरूप आइ. भि. एफ उपचार विधि अपनाउन सकिन्छ ।

IVF विधिमा, महिलाको अण्डा शरिरबाट बाहिर झिकेर पुरुषको वीर्यसँग प्रयोगशालामा निषेचन गरिन्छ । प्रयोगशालामा विकशित मानव भ्रूण, महिलाको पाठेघरमा राखिन्छ । यसरी महिलालाई गर्भधारण गराउन सकिन्छ ।

IVF मा विभिन्न समस्या अनुसारको तरिका अपनाउन सकिन्छ । जस्तै:

१. आफ्नो वीर्य / आफ्नै अण्डाको प्रयोग: नली बन्ध भएको अवस्था या सबै तत्व ठीक भएतापनि गर्भधारण गर्न नसकिएको अवस्थामा ।
२. आफ्नै वीर्य / Donation को अण्डा प्रयोग: महिलाको अण्डाको भण्डार क्षय भएको अवस्थामा ।
३. ICSI (Intracytoplasmic Sperm Insemination): पुरुषको वीर्यको गुणमा कमजोरी भएमा ।
४. आफ्नै अण्डा / Donation को वीर्य: शुक्रकृटा उत्पादनमा पूर्ण रूपमा त्रुटी भएको पुरुष ।
५. इम्ब्रियो डोनेशन (Embryo Donation): दुबैजना को शुक्रकृट र डिम्बको गम्भिर समस्या भएको अवस्थामा ।

“बाँझोपन” एक जटिल सामाजिक समस्या हो । यहि सामाजिक वेधितिलाई केन्द्रित गरेर, प्रशिद्ध नाटककार श्री गोपाल प्रसाद रिमाल ज्यूले आफ्नो अति मर्मस्पर्शी नाटक “ मशान” मा निसन्तान अवस्थाले एउटा घरलाई कसरी डरलाग्दो सत्राटा छाएको मशान घाट बनाइदिन्छ, अति मुटु छुने पात्र “हेलेन” मार्फत ब्याख्या गरेका छन् ।

संक्षिप्तमा हेलेन र कृष्णको सानो परिवारमा सन्तानको ठाउँ अधुरो छ । हेलेन आफ्नो कृष्णको दोस्रो विवाह गरेर छोरो प्राप्तीको सुखको होडमा हुन्छिन । सौताबाट बालक छोरो प्राप्त हुन्छ । तर आपसी बैमनाशयताका कारण हेलेन अन्तत, एकली हुन्छिन । रमाइलो घर, मशानको आगोमा खरानी हुन्छ । यो नाटक लखन लगभग आधा शताब्दि अगाडीको हो ।

आज हामी एकैइसौँ शताब्दिमा छौ । Sir Patrik Streptoe, Sir Edward र Jean Purdy का, कृत्रिम गर्भधारण टेक्नोलोजी जगतमा, अतुलनिय आविष्कारका कारण अब उपरान्त कोही महिला पनि “हेलेन” को अवस्था पुग्नु पर्दैन ।

Sir Patrick, Sir Robert तथा Sir Jean का शताब्दिकै महान योगदान सर्वदा अविस्मरणिय रहन्छ ।

(नोट: कथा १, २, ३ का घटनाहरू “क्रियटर्स आई.भि.एफ नेपाल” मा आएका दम्पतिका साँचो घटनामा आधारित हुन । गोपनियाताका लागि पात्रका नाम फेरिएका छन् ।)

लेखक:

-डा. रेनी प्रधान

गाइनोकोलोजिष्ट तथा फर्टिलिटी स्पेशियलिष्ट

क्रियटर्स आई.भि.एफ नेपाल प्रा.लि.



“आमा”

नौ-नौ महिना कोखमा राखी पुण्य गरिसक्यौ,
आमा तिमीले मेरो लागी के-के गरिसक्यौ।
पिठ्युमा बोकि सारासंसार देखाईदियौ,
क-पुरी“क” खरायो“ख” सबैसिकाईदियौ।।

मेरै हांसो तिमी सारै खुसि हुनेकुरा,
नतनिन्द्रा न तभोक हुन्थ्यो तिम्रो पुरा।
दुःख पीडाआफुलिई हसाइ राख्यौमलाई,
पछ्यौरीको न्यानोपनमा फसाई राख्यौ मलाई।।

सुखअनि खुशीहरु तिम्रौ लागी आमा,
दुःख पिडा मलाई अरु तिम्रौआमा।
कहा सक्छुर तिनीआमा तिम्रा दुघका भारा,
तिम्रै लागी सुम्पेको छु जीवन मैले सारा।।

घाम भन्दा पहिलेआमा, जुन भन्दा पहिले,
तिमी नैहो दैव भन्दा ठुलो मात्रे मैले।
निःस्वार्थ प्रेम गर्ने मात्र एउटै नाम,
संसार मै सबै भन्दा सुन्दर ब्यक्तिआमा।।

- पुजा श्रेष्ठ

"The Harsh Truth"

Every living creature ever existed in this universe dreams of having offspring at certain period of their time. They are ready to face every obstacles and struggle to bring their newone to the world. Most of them become successful while some failed even after trying hundred of times. They felt tired and frustrated of listening to same question again & again from family, friends and relatives. i.e. **"WHEN?"** Their inner heart cries, "How can I tell to the world it's not happening". And at one point they lose all their hopes and their dreams.

Even though they had everything in their life. They still feels like they do not have anything in their life. They misses the **"Little most valuable things"** in their life.

And then suddenly the miracle happens to them after visiting to Creators IVF Nepal. They feels like sunshine in their life. Thanks & credit goes to Creators IVF Nepal for fulfilling all those dreams, hope, wants, desires of having littleone for thousands of people. I feel proud to have working with this wonderful team.

Thank You!!

CREATOR'S IVF NEPAL

- Mr. Roheet Tamrakar

"AN INFERTILITY"

Lord, what are you
Calling us to?
I'm in an in-between with
No end in sight
I never wanted a career,
I wanted to be a stay-at-
Home mom and wife.
Now what?
Are you calling us to
Adopt?
To be foster parents?
Are you teaching us to wait?...
Waiting for us to obey?
Good gifts come from
You
we don't earn them,
Should we try?
Give me patience and
Faith in the waiting
Guide us to any steps
We should take.
The influence will spread and grow
Exponentially throughout the eternities.

- Kajol Baiju

" Parenthood "

Parenting, at its best, comes as naturally as laughter. It is automatic, involuntary, unconditional love." - Sally James.



What it's like to be a parent: It's one of the hardest things you'll ever do but in exchange teaches you the meaning of unconditional love. Parenthood is the state in which individuals transit to become a parent and as such his/her roles, status, values, and needs in society changes. It does entail the responsibility of individuals being a parent and then they will need to nurture, support, and encourage their children to be positive in life to be triumphant people in future. The requirements of good parenthood are; one should have a mature and stable personality at all times to be differentiated from the crowd. Parenthood involves several responsibilities and difficult decision-making.

Parenting is very important. Effective parenting plays a vital role in whether a child becomes a productive member of society or not. When children receive the proper love and support, it helps the child develop properly and helps them to have the right mind set about life and its challenges. Proper parenting lets the child know what to expect out of life and how to deal with them as well. No parent should want their child to have to look to anyone else other than for guidance and support.

- Kajol Baiju

“COVID-19 PREVENTIVE MEASURES”

- Message to all our beloved Nepalese:

COVID-19 Virus is transmitted through droplets and contaminated fomites. The effective preventive measures include:

Use of mask:

Mask form a barrier and prevent direct entry of virus to respiratory tract. Masks should cover nose and mouth and should not have any gaps between the face and edge of mask. Always clean your hands before putting on a mask and when removing, remove it from behind. Damp mask absorbs dust and other contaminants and offer no protection thus replace the mask with a new one as soon as it becomes damp. For a healthy person, mask protects him/her from droplets of cough and sneeze. For the sick, mask prevents his/her droplet from reaching the healthy person. When not needed, mask should be disposed properly and hands should be washed.

Proper hand sanitization:

Hands should be thoroughly cleaned with 70% alcohol-based hand sanitizers or washed with soap and water before donning the mask, after removing the mask, after touching potentially contaminated fomites, before touching face etc. Alcohol and soap disrupt the outermost envelope layer of virus which renders the virus incapable of attachment and subsequent entry.

Social Distancing:

The idea of social distancing is simple: increased distance means less chance of inhaling cough and sneeze droplets and less crowding means less chance of transmission from coming across with some one that might have virus.

Seeking medical attention:

If you have fever, cough, difficulty in breathing, the seek medical attention. One should not hide their disease out of shame and/or social stigma. By Seeking help, you can protect your life and life of others.

Establishing respiratory hygiene in family:

Establish good respiratory hygiene practices in family like covering mouth and nose with bent elbow or tissue when coughing or sneezing, immediate disposing of the used tissue, proper hand and body sanitation etc. Such practice will not only prevent transmission of COVID-19, but also other respiratory bacteria and viruses.

- Amit Khanal

“WHAT A PARENT IS.....”

Being a parent is being there
Through the tantrums,



Being a parent means that
You love that little person
Which you created,

More than you could ever love yourself,
Or anybody else!

You'd readily lose sleep
To comfort them from their nightmares.

You would risk your own
Life for that small person,

You'd surely die to save them
If you needed to.

Being a parent is never a burden,
It's loving somebody else

Whole heartedly and unconditionally, for eternity!

Being a parent to your child is not a job, it's a
privilege, cherish it!

- Reena Khyaju

“DEPRESSION”

I am scared of all those voices
Inside my head

They scream to help

They could bring me to death

I can't let them win

But I'm just so tired

So tired of this life

So tired to fight

I just want to let go

Close my eyes

Take a deep breath

And sink into unconsciousness

After all

Wasn't I born to die?

But instead of these ;

Keep patience, Move on, do your best

Never give up

Surely one day,

Every things gonna be alright,

Makes you happy

And fill your life with beautiful

Colors and joys.

- Kajol Baiju

“Motherhood”



“Mother's love is a peace. It need not to be acquired, it need not be deserved.” – Erich Fromn

Motherhood:- All love beings and ends there.

Motherhood is the state of being a mother and raising a child with utmost love and care. It makes women the guiding light in the young individual's life and makes them feel secured. It comes with a lot of responsibilities, changes and challenges. Mother's are the most selfless beings, and every day is a new learning experience. That old saying, “No one loves you like your mother.” It transforms a woman entirely, and progress about keeping her child's happiness and struggles as the topmost priorities. Motherhood is a blessing for all women from God. We as a child always take our mother for granted but without, our life becomes worthless. Motherhood is the best part of life a lady can have.

- Reena Khyaju

“ANXIETY”

I'm having a real day of it,
 There was
 Something I had to do. But what?
 There are no alternatives, just the won
 something.
 I have a drink,
 It doesn't help- far from it!
 I feel worse, I can't remember how
 I felt, so perhaps I feel better.
 No. just a little darker.
 If I could get really dark, richly dark, like
 Being drunk, that's the best that's open as a
 field.
 Not the best, but the best except for the
 impossible pure light,
 To be as if above a vast prairie, rushing and
 pausing over the tiny golden heads in deep
 grass.
 Fear are overcome, through great
 accomplishment,
 But failure is impossible, and most be, if the
 individual
 Puts full effort into dosing fire.

- Reena Khyaju

“PATIENCE”

Being patient defines to be strong -
 Strong enough to hope, to cope.
 Patience is not an absence of action,
 As it makes us pay attention.
 Be calm no matter what happen,
 Stay confident, do not get impatient.
 Even if things are so tangled up,
 YOU can't do anything.
 Stop yanking during obstacles,
 NOT getting desperate is everything.
 It was once said,
 " To loose patience is To loose battle "
 Be still, Be calm,
 Allow the mud to settle.
 Realize, it's going to be a long process.
 Remember, patience always attracts happiness.
 Patience is power,
 Wait for the right moment.
 Never panic,
 Nothing is permanent.
 There are difficult days and long hopeless nights,
 Have faith as sun shines above darkness and there'll
 be lustrous lights.
 Trust the process,
 Do not create a mess.
 Be patience, Believe the life sequence.

- Sweta Shikhrakar

"A husband and wife must function like two wings on the same bird"

The statement given above is all about what the beautiful art says. There are hard times, when couple faces mental breakdowns, physical tiredness, societal & families pressure, and so many other things during the period when they try to conceive. It is the husband and wife who take turns for being strong for each other in the moments when the other feels weak.



- Sweta Shikhrakar



A Beautiful Sunset



Bhagawan Bahal, Themel



A night on Tihar (Light Festival)



Charya Niritrya (A Spiritual Kumari Dance)



“Significance of Mirrors in traditional religious courtyards”



An old lady walks inside the Jesthavarna Mahabihar (left). The “Kwapaa: ju” (main deity) of Hiranyavarna Mahabihar commonly known as Golden Temple (right); both being one of the eldest courtyards of Patan.

Mirrors...!!! We see them everywhere, don't we? The cosmetic shops, boutiques, hair dressers, parlor, living room, everywhere. We kind of get fond of oneself when we are in front of the mirror. Girls can never get enough of taking a glance at oneself whenever they see a mirror nearby. But have you ever visited the traditional courtyards (Baha: Bahi) of Nepal? Well, if you have or if you are lucky enough to be a resident of Nepal, then you must have noticed the mirrors in each of the courtyards you visit. Or have you ever wondered why are they kept there? Are they merely there for taking a glance at oneself whenever you visit there? Or is it signifying something?

The Baha: *Bahi* have been standing as a glory and a masterpiece of Bajrayana Buddhism. Bajrayana Buddhism seems to have flourished after about 500 years from the Mahaparinivana (demise) of Lord Buddha. The principal Newar Buddhist shrines are called Bahas. The construction of the ancient Bahas was standard: a courtyard made in square or rectangular space bounded by buildings on all sides. The ground of the courtyard is paved with either stone or bricks. The Bahas usually consist of a chaitya, mandalas and statues. Opposite the entrance of the courtyard is the shrine of the main deity of the Baha. In front of this shrine is found a chaitya and a dharma dhatu mandala which is used in connection with the principal pujas performed within the Baha. Many of the courtyards have an array of such chaityas, mandalas, mounted vajras and statues that have been placed there as offerings.

And while talking about the mirrors that we see in the courtyards, it does have a philosophical significance. In Buddhism, we believe that the world that we are living in is just a virtual one, the one which is not real at all. We have been clinging on to ones desires and needs. We have been living as if we are going to live forever. But however, we have forgotten that nothing is permanent. Everything that forms

tends to degrade sooner or later. A child is born but with each passing year he/she is moving forward towards the end. Some live long while some have shorter life. But sooner or later, it's coming to an end. This world is not real at all. If it was, then it should have been permanent, never fading, never ending.

Let's have a clearer view with the help of an example. Say we own a field with 1000 trees each with delicious ripe mango fruits and someone placed a mirror just next to the field. We see them get doubled. We see 1000 more trees, each with ripened mango fruits. We start to crave for them too. If we start generating cravings for those fruits, we are obvious to get sad. We are obvious to hurt ourselves with those cravings. But when one realizes that a mirror was placed there, we realize that the fruits we are seeing are not real. All the cravings would end. We realize that we have been hurting ourselves with the cravings for the things we couldn't have.

Similarly, the world we are living in is just like the image of ripened mango fruits on the trees. Whenever we develop cravings towards things or people or anything, we are sure to invite pain for ourselves. We should have the constant realization that the world is impermanent. This is not real. This is just a virtual place. The real world is somewhere beyond. We are here in this virtual world so that we could get closer to the real world. And how can we do that? Do good deeds, value the people around. Have a compassionate heart. Be willing to help others. Realize that whatever you have been claiming as me and mine, they will sooner or later come to an end. So, what is the ego for? We can take nothing with us when we travel through this virtual world in search of the real world. All we can take is the good deeds we have done and the merits we have earned.

Every mirror that we see in the courtyard speaks the words of wisdom that this world is not real but just a virtual image. Nothing is permanent.

- Shital Shakya

“My Experience”

My career as a Staff Nurse germinated at IVF Nepal Pvt. Ltd., Gwarko, Lalitpur. This infertility treatment center was stationed in Global Hospital as an independent organization. It was the second year of the establishment of the center that I debuted my career there. Initially a keenly novice and innocent but enthusiastic person as a nurse, I had little knowledge about infertility, its impact on individuals and families, its treatment and the magic the treatment does to a person's life. I was like a newly born lamb that wriggles along for not being able to stand firmly and trying hard with its mother's support. After working there for 7 years, the whole team started a new venture of IVF in the name of Creators' IVF Nepal at Satdobato, where I am happily working now.

Dr. Sanu Maya Shrestha, my mentor, has always been by my side to give me all supports I required to learn everything about my job. She taught me how I should talk and behave with the patients, with my colleagues and with my seniors. I was much unaware about infertility and its treatment. I did not even realize if there existed infertile couples. But, working at IVF Nepal got me to understand their possibilities. Sometimes, sterile couples' tears made me sad and pray for healthy babies for them. Happy were the moments when they were gifted with angels.

I believe in transformation through time and experience. I can't remember how many times I have been scolded at during my 7 working years in IVF Nepal and 6 more years at Creators' IVF Nepal, but it is so pleasant to recall how many things I learnt at such moments.

I have seen the growth of myself and this center like a mother sees her baby grow. Both the center and the staff have always been babies for Dr. Shrestha to nurse and rear. Both the center and the staff grew from infants to toddler and are now at their early teens. At IFV Nepal we had fewer patients, fewer staff and fewer possibilities. Here at Creators' IVF Nepal, we have bigger number in all these regards,

which has offered the Center larger name and fame.

Working with Dr. Shrestha is like being with a loving mother. The only difference is that, here, we are in a bigger family, which is carefully nurtured by a greater mother. I recall some interesting events I have ever had. First, the faces that shone when they were granted the gift of children through our counseling and treatments. The pleasure of their ways of being thankful to us always remains in our hearts. Frequently, we have had gatherings that strengthened our spirit to work. These moments are pleasant to recall any time. Personally, I have had two opportunities of participating in trainings in India. These sessions allowed me to broaden my horizon of knowledge about IFV and infertility treatment.

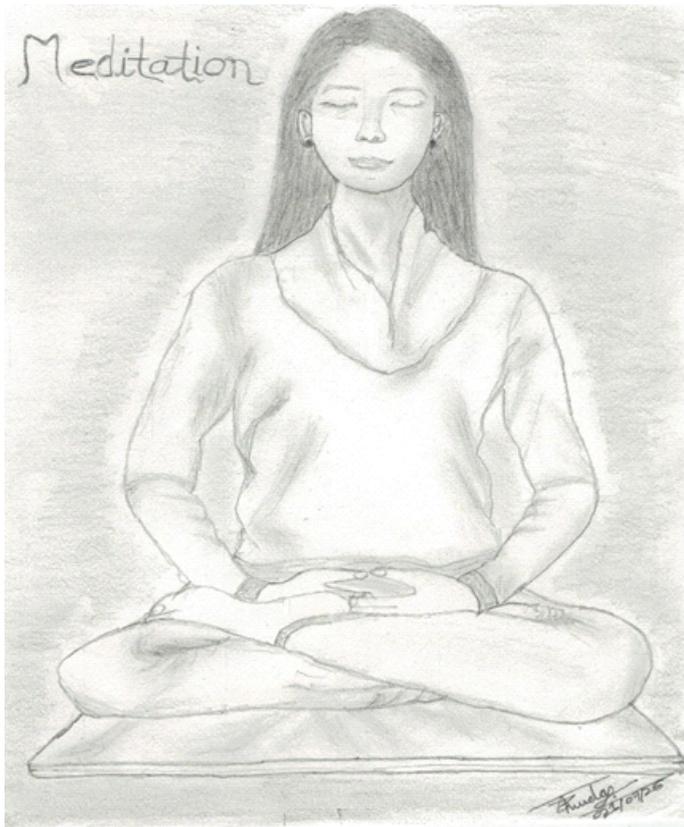
I can say proudly that this center is where one as a staff can gain overall development. Coming with a PCL degree, I am now a BN, the degree I earned while working here. Many of my colleagues have also completed their Bachelor's degree even while they are still working. We are incubated and hatched to the world of experiences.

I get calls from my relatives, friends and even people I don't know. They inquire me about this center and its credibility. I explain them everything about the process we apply at this center and the success stories the patients had. They are convinced and they optimistically visit us. They spread good message among their acquaintances. Some of the patients come to me for injections; while I even offer them home services in case of emergency. In this way, I am proud that I am creating a positive image of this center in my community.

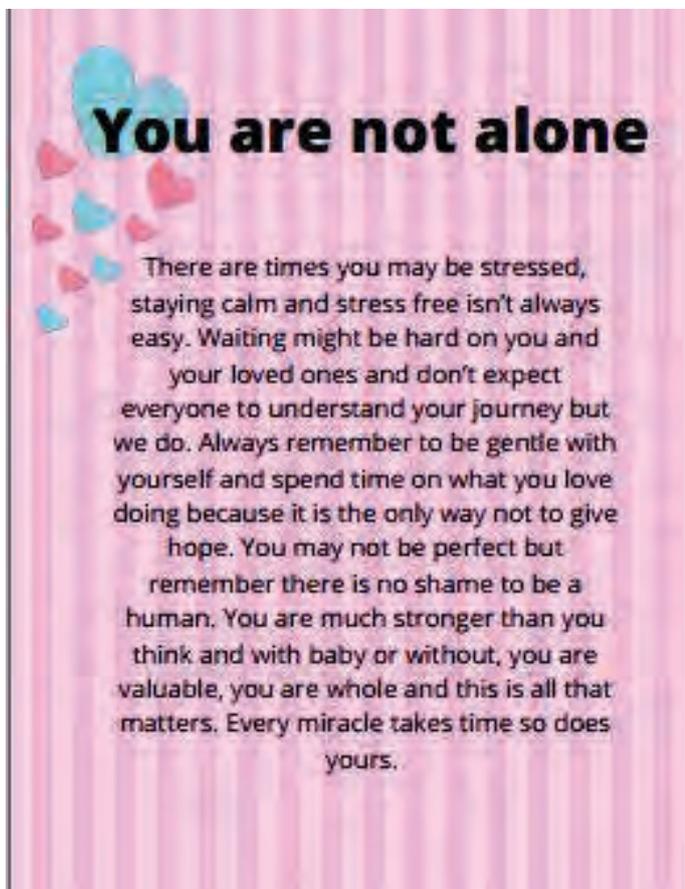
I am happy as a dedicated staff of this center. My novice enthusiasm that germinated 13 years ago has now rooted deeply into the soil of Creators' IVF Nepal. I am assured that no storm can root my dedication out of working here.

Thank you.

- Sabina Gwachha



- Sweta Ale Magar



- Sweta Adhikari

“Happiness”

What is happiness, I hear you say?
What helps us smile, on these dreary
days?

What sends a tingle, through our
bones?
What helps us talk, in cheerful tones?

How does it pick, how does it choose;
When to come, and when to move

How does it know, to work its way
through,
Every single person, like me and you

Some people try as hard as they can
To steal it away, from another man.

But it's yours forever, it's yours to keep;
Don't let them take something so deep.

You must look within yourself,
When times are blue,
Because happiness is a thing,
That lives in you.

- Debika Pradhan

“INFECTION PREVENTION (IP) TRAINING”

Infection Prevention (IP) training is concerned with preventing nosocomial or healthcare associated infection and ensuring the safety of health workers as well as the clients. Infection Prevention training was held on 20th November, 2019 at Creator's IVF Nepal, Lalitpur. Twenty one staff members of Creator`s IVF Nepal participated in the training. The trainers for the training session were Ms. Rachana Shrestha, Infection Prevention Officer at Patan Hospital and Ms. Rupa Maharjan, Operation Theater In-charge at Patan Hospital.

The main objectives of IP training I enlisted were to gain theoretical knowledge about infection prevention and implement the theory obtained during the training.



The trainers provided consistent and updated messages regarding infection prevention. They also provided a deeper understanding on how infection spreads, chain of infections, sources of infection, modes of transmission, and methods of preventing infection. They trained us on basic infection control precautions such as hand hygiene, environment cleaning, instruments decontamination, and safe injection practices as well as how and when to use standard precautions, transmission-based precaution, and Personal Protective Equipments (PPE).

The Ancient Native American says that, “Tell me and I'll forget, Show me and I may not remember, Involve me and I'll understand”. In line with this thought, there was a demonstration class after we finished our theoretical session about the methods of infection prevention or control. Re – demonstration was performed by the participants which involved made my understanding crystal clear.

Infection Prevention basics such as hand hygiene requires constant education and reminders. But because of its simple nature, these basics tend to get forgotten and neglected even by health workers themselves, because of which this training was even more crucial.

To sum up, as a clinical nurse at Creator's IVF Nepal, I received an updated and additional critical information as well as skills including infection prevention precautions to ensure the safety of my colleagues, myself, and mainly our clients.

- Sweta Shikhrakar

“BE YOURSELF”

Pace yourself, Push yourself.
No one else is going to do it for
YOU,
All of the heaven is rallying for
YOU.

Trust your ability,
Follow your path as your
capability.

Your weakness is a strength,
Celebrate it, Utilize it ! .

Big things often has small
beginings,

Collect beautiful moments and do
better things.

Remind yourself and say this;
I am a winner

I ain'tgonna held back by any fear.
Never try to live a life that looks
good on outside,
don't loose your joy.

Live a life that feels good on
inside ,

protect yourself and don't let
anyone annoy.

You're allowed to feel
overwhelmed,

You're allowed to feel helpless,
You're allowed to feel exhausted.

Remember how far you've come,
Appreciate Yourself.

For every challenges,
Sthrengthen Yourself.

Be kind to others,
Be kind to yourself.

Do it for your future self,
BE YOURSELF.

- Sweta Shikhrakar

6. Our Research works and Articles

Assisted Reproductive Technology Treatment Outcome of Creator's IVF Nepal Pvt. Ltd: A 4.5 Year Analysis

(Presented in NESOG conference, April 2021)

Shrestha Sanu Maiya; Pradhan Renee; Vaidya Dijan; Karki Anita; Gwachha Sabina.

Creator's IVF Nepal Pvt. Ltd, Lalitpur, Nepal.

Background/Aim:

The number of Assisted Reproductive Technology (ART) clinics in Nepal has been increasing but there is no available national level ART registry. This study will try to help for proper formulation of ART registry. Current study aims to assess the outcome of ART treatment at Creator's IVF Nepal (CIVF) Pvt. Ltd.

Methods:

[REDACTED]

Results:

Total of 1322 TI cycles were done, of which 158 (12%) cycles were successful.

Out of 1599 IUI cycles, 1179 cycles with husband's sperm and 420 cycles with donor sperm were carried out. Among 1599 IUI cycles, 180 (11.3%) were successful.

Total 768 IVF cycles were performed, of which 568 cycles were with Controlled Ovarian Hyper-stimulation (COH). 153 cycles with Oocyte Donation (OD) and 47 cycles underwent Embryo Donation (ED). Mean number of embryos transferred was 3.12 ± 1 . Among 768 cycles, 372 (48.4%) cycles were with positive BhCG level. However, the Clinical Pregnancy Rate (CPR) was 43.2% and Live Birth Rate (LBR) was 33.33%.

Conclusion:

The data presented in this study completely covers ART treatment outcome at CIVF over 4.5 year period. Similar data at the national level is yet to be reported. Hence, a proper registry at the national level has to be made for the standardization of ART treatment.

IVF outcome in menopausal age group and in cases of premature ovarian failure: An observational study

(Presented at MESON Conference, 2016)

Shrestha S.M.¹, Waidya D.³, Adhikari K.⁴

Background and Aim:

Infertility is a tangible problem in the society and is a source of psychosocial sufferings. It is especially a difficult issue to overcome when the female partner has already reached the menopausal age group or suffers from premature ovarian failure (POF). In Vitro Fertilisation (IVF) has been considered an alternative treatment for these group of women. However the outcome following the treatment needs to be evaluated. This study aims to assess the IVF outcome in menopausal age group and in cases of POF.

METHODS

This is an institution based retrospective study conducted from 2007 to 2016 in two two private organisations namely IVF Nepal Pvt. Ltd. (IVF Nepal) and Creator's IVF Nepal Pvt.Ltd (CIVF). Total of 50 IVF batches were analyzed in IVF Nepal and 6 IVF batches from CIVF. All the cycles with menopause and POF who received IVF treatment with oocyte donation or embryo donation were recruited for this study. Data analysis was done in EXCELL.

RESULT

A total of 56 IVF batches with 686 IVF cycles were conducted during the study period. Among 686 cycles 134 (19.53%) were of menopausal age group (≥ 40 years) and 28 (2.76%) cycles were with premature ovarian failure. Among the 134 cycles of menopause age group, 76 (56.71%) cycles tested positive for pregnancy. Likewise, out of 28 cycles of POF, 7 (36.84%) cycles tested positive for pregnancy.

CONCLUSION

The scenario observed at our centre gives a positive outlook to the treatment option for menopausal women and those suffering from premature ovarian failure.



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Original Article

Ultrasound Guided Embryo Reduction in a Fertility Center in Nepal: An Observational Study

Sanu Maiya Shrestha Pradhan¹, Renee Pradhan¹, Paban Sharma²

Abstract:

Background and Aims: The chances of multiple pregnancy rate increases in Assisted Reproductive Technology (ART) treatment. Different techniques have been developed to reduce high order multiple gestation to improve perinatal outcome. The current study aims to assess the pregnancy outcome following embryo reduction.

Methods: This was a retrospective observational study conducted from August 2018 till February 2021 at Creator's IVF Nepal Pvt. Ltd. In this study, 22 cases were enrolled with high order multifetal gestation that included quadruplets and triplets. All women had conceived by ART by Intrauterine Insemination (IUI) or In Vitro Fertilization (IVF). Embryo reduction was done either by transvaginal or by transabdominal ultrasound guidance.

Results: In total 22 cases underwent embryo reduction (ER), of which 15 (68.18%) by transvaginal and 7 (31.8 %) by transabdominal approach. Among them one had undergone IUI and the rest had IVF. Mean age of women was 32.36 ± 5.34 years. Out of 22 cases, 16 (72.72 %) delivered at mean gestational age 34.75 ± 1.84 weeks. There were 4 (18.18 %) miscarriages.

Two cases are awaiting delivery. Out of sixteen deliveries there was one triplet, eleven twins and four singleton deliveries. Majority of them underwent cesarean deliveries.

Conclusions: Multifetal pregnancy can cause different obstetric complications. Women had better perinatal outcome with ultrasound guided ER. However, majority of women had to undergo cesarean deliveries.

Keywords: Artificial Reproductive Technology (ART); In Vitro Fertilization (IVF); Embryo Reduction (ER).

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Overcoming Infertility: From a Public Health Perspective

World Health Organization (WHO) considers infertility as a global health issue since it affects millions of people worldwide. In fact, an estimated 15% of reproductive age couples are affected globally. (“WHO | Infertility is a global public health issue,” 2010.). Despite, the growing prevalence of the disease and the agony it causes to the childless couples, infertility continues to go unnoticed and gets overshadowed by the focus on abortion and contraception. (Holtzman, 2013)

Public health is “the art and science of preventing disease, prolonging life and promoting health through the organized efforts of society” (Acheson, 1988; WHO). It is concerned with all aspects of health and well-being, not just the eradication of specific diseases. The growing prevalence of infertility along with its social consequences such as stigma, discrimination and ostracism faced by childless couples especially women, the preventable nature of probable risk factors, association of infertility with sexually transmitted diseases, consideration of reproduction as a basic human right, inequities in access and utilization of fertility services and lastly, the potential benefits of various public health methods in reducing and managing infertility, such as data collection and surveillance, policy formulation, education, and prevention are the major public health agendas in infertility. (Lemoine and Ravitsky, 2013)

One of the primary goals of public health is to promote health through disease prevention. Designing and implementing successful solutions to protect both men and women's fertility requires a firm understanding of the risk factors for infertility. Though the causes of infertility remain largely unknown, some modifiable risk factors have been identified. (Fidler and Bernstein, 1999)

Sedentary behavior, obesity, eating disorders, heavy alcohol use, smoking, late marriage, miscarriages, and recurrent abortions are among lifestyle variables that contribute to infertility. Environmental and occupational hazards also account for an unknown proportion of infertility. In context of Nepal, millions of young fertile groups migrate for work and return home after a long absence, which could have potentially reduced fertility. They also visit their homes from time to time, and may bring sexually transmitted diseases with them which is another risk factor of infertility. Increasing use of pesticides have also been linked to infertility. (Gautam and Risal, 2018)

A public health policy focusing on primary prevention (e.g., eradicating infertility risk factors) will reduce infertility prevalence, improve health and quality of life, and avoid the expenses of infertility treatment. Screening of sexually transmitted disease among men and women, preventing adolescents from smoking cigarettes, helping people to quit smoking, and promoting physical exercise and a balanced diet are all instances of primary prevention that are achievable. In terms of secondary prevention, early detection and treatment of underlying medical issues, could help preserve fertility. Although, infertility treatment is generally considered safe, it is however, linked to negative health consequences for both mother and child. This has prompted the need to implement tertiary preventive initiatives i.e., prevention of adverse outcomes of infertility treatment. (Lemoine and Ravitsky, 2013)

Apart from the above three levels of preventive strategies, surveillance systems and researches must be designed, and implemented in order to get a meaningful population-based assessment of the burden of infertility among women and men and to better understand sociodemographic, environmental, and behavioral determinants of infertility, Effective communication strategies must be implemented to educate the public about infertility prevention techniques. People who are at risk of infertility and poor pregnancy outcomes should be taught about their reproductive risks and choices. It must be investigated whether infertility education can be integrated into existing national reproductive health education campaigns. It is possible to explore how information on infertility management choices, along with adoption and child-free life, can be disseminated to the public. (Lemoine and Ravitsky, 2013)

In conclusion, prevention is an often overlooked but important component of overcoming infertility. Our understanding of infertility and the formulation of effective and sensible public policy for prevention, access to health care, and regulation of new technology can all benefit from public health perspectives and skills. Ultimately, it is now a high time to explore a public health approach to tackle infertility.

- Anita Karki

7. CREATOR`S IVF NEPAL IN MEDIA



नेपालको नम्बर १ स्वास्थ्य पत्रिका
 राष्ट्रिय मासिक

जनस्वास्थ्य सरोकार

पोषण ■ फिटनेस ■ जीवनशैली

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मधुमेहको एक जटिलता
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रिएजेन्टस् किट
 नक्कली प्याकमा

१ सय १४ टेस्टटयुब बेबीलाई
 जन्म दिएँ

● डा. सानुमैया श्रेष्ठ (प्रधान)

मेडिकल र सर्जिकल
 व्यावसाय ज्ञान र वैद्यकीय तर्जिम
 जोडिएको छ ।
 ● विद्यालय परिषद

सबै उमेरमा
 यौनको आनन्द

मस्तिष्कबाट पत्ता लगाउने उपकरण

सन् २००४ मा सानुमैयाँले अस्ट्रेलियाको न्यु साउथ वेल्स विश्वविद्यालयबाट प्रसूति तथा स्त्रीरोगअन्तर्गत आईभीएफ अर्थात् टेस्ट ट्युब बेबी विषयमै स्नातकोत्तर गरिन्। सन् २००४ मै उनी नेपाल फर्किन्। सन् २००७ जुलाईसम्म नेपालको ओम आईभीएफ सेन्टरमा काम गरिन्। उनकै नेतृत्वमा भएको उपचारबाट नेपालमा पहिलोपटक सन् २००७ डिसेम्बरमा टेस्ट ट्युब बेबी जन्माइएको हो। उनको आईभीएफ नेपाल प्रालिबाट हालसम्म एक सय २६ जना टेस्ट ट्युब शिशु जन्मिसकेका छन्।



सानुमैयाँ सपना



कृष्ण किरती

समस्या आई समाधानको उद्गम बिन्दु पनि हुन सक्छ। एकजना स्त्रीरोग विशेषज्ञ आई विज्ञानको पीछमा रम्यालिन पर्दा परम्परा र अन्धविश्वासले जगिएको समाजमा बाँच्न निश्चय नै कठिन हुन्छ। तर, त्यही स्त्रीरोग विशेषज्ञले छोरो विशेषज्ञको सही परामर्श र आफ्नो अमाको निरन्तर प्रयास र विश्वासले सन्तान जन्माउन सकिन्। दुई छोरोको शोभाप्याराली आमा बनिन्। अझ त्यही आमा अहिले हकबर्ष महिनावालाई आमा बन्ने सोभाम जुटाइरहेकी छन्। डा. सानुमैयाँ श्रेष्ठ त्यही आमाको केन्द्र हुन्।

खलितपुरको ग्वाकोचोकस्थित आईभीएफ नेपाल (टेस्ट ट्युब बेबी) प्राइभेट लिमिटेडमा डा. सानुमैयाँ अठ नेतृत्वकारी भूमिका निर्वाह गर्दैछिन्। उनी धेरै विराट जोडीलाई टेस्ट ट्युब बेबीबाटै सन्तान सुख दिँदैछिन्। नेपालका धेरै

कम विपन्नता उपचार केन्द्रमा यो अग्रस्थानमा छ। सम्पूर्ण रूपमा महिला स्वास्थ्यकर्मी रहेको यो केन्द्रमा महिनिर्गच्छे दर्जनौं महिला आईभीएफ अर्थात् टेस्ट ट्युब बेबीको लागि उपचारार्थ आईछिन्। डा. श्रेष्ठको भनाइअनुसार उनको केन्द्रमा सफलताको दर सरदर ५० प्रतिशत छ। पार्षदायन भएकामध्ये ३० प्रतिशत आमा सफलतापूर्वक मुकैरी बन्दन्। त्यसो त आईभीएफ खलितपुरको एकमात्र उपचार विधि भने होइन।

कतिपय अवस्थामा सामान्य परामर्श र जर्को सरल विधि आईपूजाईबाट पनि निःसन्तानको उपचार गर्न सकिन्छ। डा. सानुमैयाँ नेजानकी चर्चित स्त्रीरोग विशेषज्ञ हुन्। पूर्वसोभियत संघबाट एमबीबीएस गरी उनले नेपालमै प्रसूति तथा स्त्रीरोगमा विशिष्टता हासिल गरिन्। इन्डियन क्विन्सोमानसिंह प्रधानसँग विवाहबन्धनमा बाँधिएको तीन वर्षसम्म पनि सन्तान भएनन्।

एक चिकित्सक भइरत पनि सामाजिक कुरोहबाट पियोलिनुपर्ने बाध्यता। उनका एउटा पलियो संकल्पले उस शिशु। विरचय पनि प्रविधि र विशेषज्ञको अभावले सँभैको नेपालमा महिला बाँजो हुन् स हुन सक्छ। पत्नी अजसकामा जब स्त्रीरोग विशेषज्ञबाट सही परामर्श र उपचार हुँदैनथ्यो, उनी आफ्नो आमाको भाने गरेकी

सकाशत्मक कवयांश सम्प्रेषिन्, 'अब बच्चा जन्माउने फालो दियो हुन्छ। मलाई लाग्छ भएपछि मेरो शरीरप्रति निर्दयी छैनन्।' आमा कुञ्जप्यारी श्रेष्ठ र युवा प्रेमलाल श्रेष्ठका अठ सन्तानमध्ये तेस्रो सन्तान हुन्, सानुमैयाँ। उनी आफ्ना दोस्रो स्त्रीरोग विशेषज्ञलाई बढी सम्मानका साथ सम्प्रेषिन्, जसले उनलाई प्राकृतिक रूपमै गर्भाधान गर्न सही परामर्श तथा औषधि उपचार गरे।

सन् २००४ मा सानुमैयाँले अस्ट्रेलियाको न्यु साउथ वेल्स विश्वविद्यालयबाट प्रसूति तथा स्त्रीरोगअन्तर्गत आईभीएफ अर्थात् टेस्ट ट्युब बेबी विषयमै स्नातकोत्तर गरिन्। सन् २००४ मै उनी नेपाल फर्किन्। सन् २००७ जुलाईसम्म नेपालको ओम आईभीएफ सेन्टरमा काम गरिन्। उनकै

नेतृत्वमा भएको उपचारबाट नेपालमा पहिलो पटक सन् २००७ डिसेम्बरमा टेस्ट ट्युब बेबी जन्माइएको हो। उनकै आईभीएफ नेपाल प्रालिबाट हालसम्म एक सय २६ जना टेस्ट ट्युब शिशु जन्मिसकेका छन्।

खलितपुरमा जन्मिएको डा. सानुमैयाँ पनि बला कयी किसानमा आमाको अगाडको किरण बनेकी छिन्। सन्तान नहुँदा सामाजिक, सांस्कृतिक तथा भावसिद्ध तथ्यसँग जुद्ध गर्न भएकाले डा. श्रेष्ठ विवाहित दम्पतीलाई सम्पूर्ण बन्धन फाँट्न सल्लाह दिन्छिन्। स्कुलदेखि विश्वविद्यालयतकसम्म पनि काँटले दोस्रो तुल नजानेकी डा. सानुमैयाँ भन्छिन्, 'सबैभन्दा ठूलो सन्तान सुख हुँदै रहन्छ।'



नाप्टे निःसन्तानको पीडा

● एकराज पाठक

डाक्टर साहेब बच्चा नहुनुमा मेरो गल्ती कि श्रीमतीको हो भन्निनोस् न ! सिधै यिनै शब्दबाट सुरु हुन्छ श्रीमान्को जिजासा । यता, उसले त्यसो भनिरहँदा संगै आएको श्रीमतीका आँसु गहभरि भइसकेका हुन्छन् । नहुन पनि कसरी ? यदि, श्रीमतीमा बाँझोपन छ भनिदिने हो भने भरे बेलुकादेखि नै अर्को बिहे गर्ने तयारी त्यस परिवारमा सुरु हुन्छ । बच्चा नभएर अर्को बिहे गरेपछि ती महिलाप्रति त्यस परिवारले गर्ने व्यवहार कस्तो होला ? नेपाली समाजमा त्यसको कुरै नगरो । ती निःसन्तान दम्पतीलाई मैले दिने परामर्शपछि पनि यदि महिलामा नै बाँझोपन देखियो भने त्यस समयमा ती महिलाको निःसन्तान हुनुको पीडा सायद यो संसारमा बनेको कुनै पनि मेडिकल ल्याबले परीक्षण गरेर मापन गर्न सक्दैन । उनीहरू सन्तानबाहेक अर्को कुनै त्यस्तो अलौकिक वस्तुको चाहना नै राख्दैनन्, यतिखेर उनीहरूको त्यो पीडा कम गर्न सार्दै गाह्रो पर्छ ।

दम्पतीको बाँझोपनको उपचार र त्यसबाट सम्भव नभए टेस्टट्युब वेबी प्रविधिको उपचार गरिरहेकी डा. सानुमैया श्रेष्ठको अनुभव हो यो । गएको आठ वर्षदेखि सेवारत उनी भन्छिन्, 'मलाई त लाग्छ, यो औषधिले निको हुने नभई परामर्श र सान्त्वनाले बढी नै काम गर्नेछ । मेडिकलभन्दा पनि पहिलो सामाजिक उपचार आवश्यक रहेको उनको अनुभव छ । बाँझोपन भएका दम्पतीलाई पहिला मानसिक रूपमा तयार पार्नुपर्छ र आफुभित्रको कमजोरी र झीनताबोधका विरुद्ध आफै लड्न सक्ने बनाउनुपर्छ । उनले भनेजस्तै संगसंगै जँचाउन आएका दम्पतीलाई सुरुमा

नै र सिधै एकअर्काको बाँझोपन छ भनिदिदा श्रीमान् वा श्रीमती नै पनि अर्को बिहेको बारेमा सोचिहाल्छन् । त्यसैले उनीहरूलाई उपचारभन्दा अघि परामर्श चाहिने गर्छ । डा. श्रेष्ठ भन्छिन्, 'मैले उपचार मात्र गरेकी छैन, दम्पतीको सुमधुरता र सामाजिक निरन्तरताका लागि वातावरण बनाउने काम पनि गरेकी छु । दम्पतीलाई मात्र 'कन्भिन्स' गरेर हुँदैन, फेरि त्यहाँ सासु-ससुरा पनि आउँछन् । उनीहरूको पहिलो प्रयास नै छोरालाई अर्को विवाह गरिदिने हुने गर्छ ।' अस्ट्रेलियामा टेस्टट्युब वेबी प्रविधिमा विशेषज्ञता हासिल गरेर नेपाल फर्केकी डा. श्रेष्ठले आठ वर्षअघिदेखि नेपालमै यो उपचार सेवा सुरु गरेकी छन । र्बाकोमा रहेको ग्लोबल अस्पतालको ठाउँ तलामा उहाँले सञ्चालन गरेको आईभीएफ नेपालमा हाल उपचारभन्दा पनि बढी यस्तै आँसा र परामर्शहरू हुने गर्छ । 'श्रीमान् र श्रीमतीको शरीरमा हुने सामान्य हर्मोनको कमी वा प्रजनन अंगमा हुने सामान्य रोकबाट वा संक्राणले मात्र पनि बाँझोपन देखिन्छ । तर, अघिल्लो जन्मको पाप या महिलाको खराबीजस्ता मानसिकता यसप्रति राख्ने गरिन्छ,' उनी भन्छिन् ।

आफै पीडित भएर त्यस क्षेत्रको सेवामा लाग्ने चिकित्सक कम्पै पाइन्छन् । तर, उनी भने आफैले भोग्नुपरेको बाँझोपनको पीडाले नेपालका निःसन्तान दम्पतीको सेवाका लागि लागेकी हुन् । 'सुरुमा म पनि यसको पीडित थिएँ र समस्या भोगेँ । उपचारपछि म सफल भएँ र सन्तान जन्माएँ । मलाई हुन्छ भने अरूलाई पनि त सफल बनाउँछु भनेरै लागेको हुँ,' उनको अनुभव छ । अहिलेसम्म मेरो परिश्रमका कारण भगवानले धेरै दम्पतीमाथि सन्तानको हात थोपिंदिएका छन् । सयौँ आमा र छोराछोरी खुसीले जन्मिएका छन् । शास्त्रवमा

टेस्टट्युब वेबी अन्तिम विकल्प हो । त्यसअघि पनि पुरुष र महिलाको बाँझोपन निवारणका लागि गरिने विभिन्न उपचार प्रविधिहरू छन् । केयौँ दम्पतीले यिनै उपचारबाट नै सन्तान प्राप्त गरेका पनि छन् ।

अहिले उनको आईभीएफ नेपालमा ४२औँ लटको टेस्टट्युब वेबीको काम भइरहेको छ । एक लटमा २० भन्दा माथि ३५ जनासम्म आमाहरू यो उपचारमा हुन्छन् । पछिल्लो लटक २० जनामा गरिएको यस प्रविधिमा १२ जनाको सफल भएको छ । अब ती १२ जना आमा बच्चा तर्जनिमंदासम्म निकै नै होसियारीपूर्वक हेर्नुपर्छ । डा. श्रेष्ठ भन्छिन्, 'अब ती महिनासम्म ती आमाहरूकी आमा हुँ म । मलाई देखेनन् भने आत्तिन्छन् र फोन गरिहाल्छन् । अहिलेसम्म सो संस्तरबाट ३ सयभन्दा बढी बच्चा जन्मिएका छन् ।' नेपालमा बाँझोपन भएका दम्पती कति छन् भन्ने कुनै तथ्यांक छैन । अर्कोतर्फ यो सन्तानोत्पादन प्रविधिको सफलता दर पनि कति छ भन्ने अनुसन्धान गर्न नसकिएको उनको भनाइ छ । महँगो प्रविधि, आवश्यक जनशक्तिको अभाव र सरकारले आवश्यक मात्रामा सहयोग एवं समन्वय नगर्नु यसका प्रमुख चुनौती रहेको उनको अनुभव छ । नेपालमा सबैभन्दा पहिलो विस २०१७ मा जोम अस्पतालमा यो प्रविधिबाट बच्चा जन्मिएको थियो । हुन त त्यसअघि नै पनि डा. उमा श्रीवास्तवले टेस्टट्युब वेबी जन्माएको बताएकी थिइन् तर पनि त्यसको आधिकारिक तथ्यांक भने सार्वजनिक भएको छैन । पछिल्लो समयमा नेपालमा यो प्रविधिको आगमनसँगै निःसन्तान दम्पतीको पीडामा केही मात्रामा भए पनि मलम लगाउन सकेको डा. श्रेष्ठको अनुभव छ ।

जनस्वास्थ्य | निःसन्तान विशेष

निःसन्तान उपचारमा दक्ष चिकित्सकको भूमिका



पहिला सन्तान नहुनुको कारण पत्ता लगाउनुपर्छ । त्यसपछि गर्भाधारणका लागि साधारण तरिकाबाट उपचार शुरू गर्नुपर्छ ।



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'सन्तान नहुने दम्पतिले एकैचोटी टेष्टट्यूब बेबी गर्नुपर्दैन । यसको कारण हेरी साधारण उपचारबाट शुरू गर्नुपर्छ । केही नलागेपछि मात्र टेष्टट्यूब बेबीमा जानुपर्छ । तर यदि महिलाको दुवै डिम्बबाहिनी नली बन्द भएमा टेष्टट्यूब बेबी मात्र एक विकल्प हो । अहिलेसम्मको आईभिएफ गरेको नतिजा विश्लेषण गर्दा सबैभन्दा धेरै पाठेघरको डिम्बबाहिनी नली बन्द भएका महिलाहरू छन् । सरकारी तहबाट निःसन्तान उपचारको विकासका लागि सहयोग र सहजीकरण भएमा धेरै निःसन्तानलाई सन्तान सुख दिन सकिन्छ । हामीजस्ता सबै विशेषज्ञहरूलाई अघि बढ्न अफ हौसला मिल्ने देखिन्छ ।' - डा.सानुमैया श्रेष्ठ भन्नुहुन्छ ।

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Australia Awards Scholarship (AUS AID) छात्रावृत्तिमा अस्ट्रेलियाको न्यू साउथ वेल्स विश्वविद्यालयमा स्त्री तथा प्रशुतिमा मास्टर्स डिग्री सकेर सिडनीस्थित रोयल हस्पिटल फर ओमेनमा इनभिट्रो फर्टिलाइजेसन (आईभीएफ) सम्बन्धि तालिम लिँदा वरिष्ठ टेष्टट्यूब बेबी विशेषज्ञ डा. सानुमैया श्रेष्ठ (प्रधान) लाई निःसन्तान नेपाली दम्पतिलाई सन्तान सुख दिने दूलो चाहना थियो । नेपाल फर्किएपछि डा. श्रेष्ठले प्रशुति गृहको एकेडेमिक रजिष्टर हुँदै ओम हस्पिटलको ओम आईभिएफ सेन्टरसम्म काम गर्नुभएको थियो । पछि ग्वाकोस्थित ग्लोबल हस्पिटलमा रहेको आईभिएफ नेपालबाट पनि धेरैलाई सन्तान सुख दिन सफल हुनुभयो । हाल आफ्नै क्रियटर्स आईभिएफ नेपाल प्रा.लि. स्थापना गरी सो संस्थाको सञ्चालकसमेत रहेकी वरिष्ठ प्रजनन विशेषज्ञ डा. श्रेष्ठको भनाइ आफ्नै शब्दमा.... ।

दक्षता

निःसन्तान दम्पतिको उपचार गर्ने विज्ञ चिकित्सक सिपालु र दक्ष हुनुपर्छ । उनीहरूसँग महिला प्रजनन प्रणालीसम्बन्धि सम्पूर्ण आधारभूत ज्ञान हुनु जरुरी हुन्छ । महिलाको सेक्सुअल लाइफलागायतका सामान्य कुराकोसमेत ख्याल गर्नुपर्छ । निःसन्तान दम्पतिहरूलाई सामान्य जाँच नगरी आईभिएफ जाने सल्लाह दिन हुँदैन । कतिपयले सामान्य उपचार गरेमा सन्तान हुने अवस्थाका दम्पतिहरूलाई आईभिएफ गराइरहेका छन् । कतिपय अस्पताल



डा.सानुमैया श्रेष्ठ (प्रधान)
वरिष्ठ प्रजनन एवं आईभिएफ विशेषज्ञ
क्रियटर्स आईभिएफ नेपाल प्रा.लि.

क्लिनिकहरूले इफर्टिलिटीको उपचार र डायग्नोसिसको नाममा अनावश्यक प्रयोगशाला परीक्षणमा खर्च गराइरहेका हुन्छन् । बिना दक्ष जनशक्ति आईभिएफ उपचार सफल हुनसक्दैन । आईभिएफ उपचार क्षेत्रमा लागेका डाक्टरहरू एसिस्टेड रिप्रोडक्टिभ टेक्नोलोजी (ART) बारे अपडेट भइरहनुपर्छ । वास्तवमा आईभिएफ उपचार विधि कला (ART) हो । सिमित स्रोत साधनबाट राम्रो परिणाम देखाउन सक्नु एउटा दक्ष डाक्टरमा हुनुपर्ने गुण हो । त्यसर्थ निःसन्तानसम्बन्धि जनचेतनामुलक कार्यक्रमको पनि उत्तिकै जरुरत छ ।

पहिला सन्तान नहुनुको कारण पत्ता लगाउनुपर्छ । त्यसपछि गर्भाधारणका लागि साधारण तरिकाबाट उपचार शुरू गर्नुपर्छ । नेपालमा पति पत्नीको सबै ठीक भएर पनि सन्तान नहुने समस्या धेरै छ । यस किसिमको समस्या लिएर मेरो क्लिनिक आउने दम्पतिको संख्या करिब ४० प्रतिशत छ । शुक्राक्रिट शुन्य हुने पुरुषहरूको संख्या करिब २५-३० प्रतिशतको हाराहारीमा छ । महिलाको पाठेघरको दुवै नली बन्द हुने संख्या पनि धेरै छ । यसका लागि आईभिएफको विकल्प छैन । योनीको सरसफाइमा ध्यान नदिँदा हुने संक्रमण, पटपटक गर्भपतन गराउँदा हुनसक्ने इन्फेक्सन,

जनस्वास्थ्य | निःसन्तान विशेष

पाठेघरको ट्युमर निकाल्दा हुनसक्ने संक्रमण, पेल्विक संक्रमण, इन्डोमेट्रियोसिस, क्षयरोगलगायतका कारण पाठेघरको दुवै नली बन्द हुँदा यस किसिमको समस्या देखिनसक्छ। यद्यपी मेरो अनुभवमा पाठेघरको दुवै नली बन्द भएर आईभिएफ गराउनुपर्ने महिलाहरूको संख्या धेरै छ।

पोलिस्टिक ओभरियन सिन्ड्रोम (पिसिओएस) का कारण २-३ महिनामा महिनावारी हुने कतिपय महिलाको ओभुलेसन कहिले हुन्छ भन्ने थाहा नै हुँदैन। कसैकसैको महिनावारी भएको २६ औं दिनमा बल्ल अण्डा बनेको हुन्छ। यो समयमा यौन सम्बन्ध राख्न सल्लाह दिँदा गर्भवती भएका धेरै उदाहरण छन्। पतिको शुक्रक्रिट राम्रो भएको अवस्थामा पत्नीको ओभुलेसन ढिला भएर केही हुँदैन। हामीले ट्याक गरेर यौन सम्बन्धमा बस्न सल्लाह दिने गर्दछौं। यसरी निःसन्तानको उपचारलाई सिम्लिफाइड तरिकाले लैजानुपर्छ। दुलो इन्भेष्टिगेशन गर्नपूर्व अवस्था सामान्य भएमा पत्नीको ओभुलेसन भएको समय मिलाएर यौन सम्बन्ध राखेमा गर्भ बस्नसक्छ। निःसन्तानको उपचारका हरेक खुड्किलो चढ्दै जाँदा सन्तान सुख अवश्य प्राप्त हुन्छ।

तालमेल मिलाउनुपर्ने आवश्यकता

महिलाहरूमा ओभुलेसनको समय र यौन सम्बन्धको समय नमिल्दा गर्भ रहेको हुँदैन। यस्तो अवस्थाका महिलाहरूको अण्डा बनेको समय हेरेर अण्डा भर्ने औषधि दिनुपर्छ। यसलाई ट्रिगर इन्जेक्सन भनिन्छ। ओभुलेसन गराउने इन्जेक्सन दिएर दुई दिन सँगै बसेर इन्टरकोर्ष गर्ने सल्लाह दिएका करिब १२ प्रतिशत महिला गर्भवती हुने गरेका छन्। नियमित महिनावारी हुने महिलाहरूको फर्टायल टाइम व्यक्ति अनुसार कसैको १०, कसैको १२ र कसैको १४ दिन, कसैको २० दिनसम्म पनि हुनसक्छ।

पोलिस्टिक ओभरियन डिजिजमा यदि पुरुषको शुक्रक्रिटको अवस्था ठीक छ भने औषधिको माध्यमबाट महिलाको अण्डा विकास गरेर टाइमड इन्टरकोर्ष गर्ने सल्लाह दिएका धेरै महिला गर्भवती भएको मेरो अनुभव छ।

करिब ६० प्रतिशतलाई आई.यु.आई. को सल्लाह दिइन्छ। उनीहरूमा आई.यु.आई. गर्दा प्रिमेन्सी (गर्भाधारण) दर १२ देखि २० प्रतिशत सम्म हुने गरेको छ। पुरुषको शुक्रक्रिटको क्वालिटी (गुणस्तर) र संख्या कम भएका व्यक्तिलाई आई.यु.आई. गरिन्छ। प्रति मिलिलिटर (एमएल) वीर्यमा शुक्रक्रिटको संख्या १५ सय मिलिलियन भन्दा बढी हुनुपर्छ। चल्ने शुक्रक्रिटको संख्या ५० प्रतिशत भन्दा कम भएमा पनि गर्भ बस्न सक्दैन। यस्तो अवस्थामा पुरुषको शुक्रक्रिटलाई सफा गरेर गुणस्तरीय बनाएर महिलाको पाठेघरमा राख्नुपर्छ। यो प्रविधिलाई आईयुआई भनिन्छ। आईयुआई ३-६

साइकलसम्म गरिन्छ। त्यो बेलासम्म प्रिमेन्सी हुन नसकेमा आईभिएफ गर्ने सल्लाह दिइन्छ।

इम्ब्रियोलोजिष्टको मुख्य भूमिका

आई.भि.एफ.गर्दा एन्डोलोजी ल्याबमा पुरुषको शुक्रक्रिट प्रोसेस गरेर तयार पारिन्छ र इम्ब्रियोलोजी ल्याबमा पुरुषको प्रोसेस्ड शुक्रक्रिट र महिलाको अण्डा मिलाएर इम्ब्रियो बनाइन्छ। ४८ घण्टामा फोर सेल स्टेजको इम्ब्रियो भएपछि पाठेघरमा राख्ने काम गरिन्छ। यसरी आई.भि.एफ गरेको १५ दिनमा परीक्षण गर्दा गर्भ रहेनहेको पत्ता लाग्छ। पत्नीको अण्डा र पतिको शुक्रक्रिट ल्याबभित्र एउटा ग्लासमा मिलाएर बनेको भ्रूण महिलाको पाठेघरमा राख्ने प्रविधि आईभिएफ हो। त्यसैले महिलाहरूको उमेर बढ्दै जाँदा अण्डाको भण्डार कम हुँदै जाने भएकाले ढिलो बच्चा जन्माउनेहरूले एकपटक सम्बन्धित चिकित्सकसँग सल्लाह लिनु जरुरी हुन्छ।

आईभिएफको सफलता र खर्च

आईभिएफ उपचार शतप्रतिशत सफल हुने उपचार विधि होइन। यसको गर्भाधान सफलदर ४८ देखि ५२ प्रतिशतसम्म हुन्छ। त्यसमध्ये पनि कतिपयको विविध कारणले बच्चा खेर जानसक्छ। यसरी हेर्दा हाम्रो केन्द्रबाट हातमा बच्चा लिएर जाने दर करिब ३३ प्रतिशत रहेको छ। यो आईभिएफ उपचार सर्वसाधारणका लागि खर्चको दृष्टिले त्यागि सस्तो छैन। एकपटक आईभिएफ गर्दा १ लाख ५० हजार रुपियाँ देखि ३ लाख ५० हजार रुपियाँ सम्म खर्च हुनसक्छ।

निःसन्तान र काउन्सिलिङ

सन्तान सुखको चाहना बोकेका दम्पतिहरूको शुरुदेखिको सम्पूर्ण हिस्ट्री बुझ्नुपर्छ। बिहे भएको कति समय भयो? कहिले देखि बच्चाको कोसिस गर्दैहुनुहुन्छ? पतिपत्नी बीच सम्बन्ध कस्तो छ? लगायतका प्रश्नदेखि उनीहरूलाई धैर्य राख्न अनुरोध गरेर उपचार शुरू गर्नुपर्छ। निःसन्तान आफै रोग होइन तर यो मनोसामाजिक रोग भने पक्कै हो।

गर्भपतन र निःसन्तानको सम्बन्ध

पटकपटक असुरक्षित गर्भपतन गराउनेहरूमा बाँफोपनको समस्या देखिनसक्छ। असुरक्षित गर्भपतनले पाठेघरमा संक्रमण भई ट्युब ब्लक हुनसक्छ र निःसन्तानको समस्या निम्त्याउनसक्छ। यस्तो अवस्थामा सिधै आईभिएफ गर्नुपर्ने पनि हुन्छ।



मेरो अनुभवमा पाठेघरको दुवै नली बन्द भएर आईभिएफ गराउनुपर्ने महिलाहरूको संख्या धेरै छ।



The Himalayan

ON S A T U R D A Y

From a lost cause to a beacon of hope



Sanu Maiya Shrestha

Courtesy: Creator's IVF

KATHMANDU: Unexplained infertility is a frustrating diagnosis to receive and as Sanu Maiya Shrestha, Senior Consultant Gynaecologist and IVF Specialist, puts it, it is a fairly common one. Approximately 40 per cent of couples who test for fertility problem are told that there is no explanation for why they can't conceive. Shrestha, herself was one of them when after more than a year-and-a-half of marriage, she was unable to conceive. It was November 1996 when she first consulted a gynaecologist. "On the basis of a short clinical history and a semen analysis, I had been diagnosed with 'Unexplained Fertility', Shrestha recalls. "I was, conventionally, prescribed clomiphene citrate for three months, without further observations, not even a tubal patency test."

It had been tough for Shrestha to remain childless while her own friends and family welcomed newborns into their lives. The only solace she had found in those grim days were in her mother's arms. "My mother gave me those little glimmers of hope that helped me get through those situations — often saying that God will smile upon me and that it was only a matter of time before he did."

God did indeed smile on her fate or so Shrestha had begun to think when in 1997, after about two years of trying, she was tested positive. Just when her dream of motherhood was finally coming true, her professional life as well became fraught with possibilities as she was accepted for her membership at the Royal College of Obstetricians and Gynaecologists Part II (She had completed Part I back in 1994) in London. Now she faced a dilemma to either pursue her career or have a baby. "I chose to have a baby," says Shrestha and just as she had uttered these words, she was overcome by an array of emotions of a time, which she deems as the most painful of her life. She chose to have a baby only to suffer a miscarriage at the 11th week of her pregnancy. "I was under profound emotional stress after that," she confides. "I joined Patan Hospital to take my mind off everything as consultant gynaecologist." Finally after about nine months working there she conceived naturally. Her daughter is now 20 years old.

After being selected for the AusAID Scholarship to do a Master by Research in Obstetrics and Gynaecology at the University of New South Wales in 2001, she had the opportunity to closely study Reproductive Medicine and In Vitro Fertilisation (IVF). She returned to Nepal in 2004 when IVF was fairly a new concept in the country. Initially, she worked at OM Hospital IVF Centre, which was the first specialised clinic for infertile couples started in July of 2004, before eventually heading the team of IVF Nepal at Global Hospital to establishing Creators IVF in Satdobato. Having her own plights with infertility, Shrestha found her calling in the field of In Vitro Fertilisation, helping couples

9. Memories down the lane – CREATOR'S IVF NEPAL

2015



Receiving TiKa 26th August, 2015



Two Honorable Seniors:
Prem Lal Shrestha and Dr. Tilak Man Singha Pradhan



Group Photo- 26th August 2015



Initial Days

2016

God is the ultimate creator of miracles. But sometimes he just needs a little help from humans.

Master. Bigyan Shrestha
1st IVF Baby of IVF Nepal Pvt. Ltd.
Born. Shrawan 17, 2065 (August 1, 2008)

Miss. Shristi Srijana Lama
1st IVF Baby of Creator's IVF Nepal Pvt. Ltd.
Born. Bhadra 17, 2073 (September 2, 2016)

Under the leadership of Dr. Sanu Maiya Shrestha (Pradhan)

1st Two IVF Babies by Dr. Sanu Maiya Shrestha Pradhan



Creator's IVF Nepal's 1st IVF Baby
With blessed happy Parents



Creator's IVF Specialist Dr. Sanu Maiya shrestha
With Creator's IVF Nepal's 1st IVF Baby



1st Result of Hard dedication of
Creator's IVF Nepal's IVF Team



2016 1st Anniversary Group Photo



Guests in the Anniversary



Chairman, Dr. Sanu Maiya Shrestha on Welcome Speech



Chairman with Guests in Creator`s IVF Nepal`s 1st Anniversary 2016

2017



Chairman's Happy Birthday, 2017



A Happy Moments with Creator's Family

2018



Creator's IVF Nepal's participation in ESHRE conference, Barcelona, Spain 2018



**Principle Advisor (at centre in the sitting row)
Group Photos with Board Members**



Tihar – Laxmi Puja



Tihar Celebration

2019



MoU day with Nepal Cancer Hospital and Research Centre, Harsiddhi, Lalitpur



Creator's IVF Nepal's Participation in an ISAR Conference, India 2019

2020



Covid-19, April – Staff on the Front



Covid Pandemic – Tough Time, but at the Service. April, 2020



Our Staff and a Happy Wish Moment



We strictly follow the minimum Health Standard - No Mask, No Excuse at the work place



Happy Birthday wish To Chairman Dr. Sanu Maiya Shrestha



AGM 2077- Welcoming CEO Mr. Tribeni MS Pradhan as a New Shareholder



On AGM Day 2077- Share Holders releasing Annual Report 2076/77 - Special Issue

Well Wish to our Leaving Staff Nurse Sarita Basnet (Front row at the middle)



Christmas New Year 2020/2021 Celebration Members of Board of Directors



Christmas 2020/NewYear 2021 celebration A Memorable Day.

2021



4th Feb 2021-Covishield vaccination :1st Dose At Kist Teaching Hospital



**CEO receiving Covishield vaccine 1st Dose
4th Feb 2021, Kist Teaching Hospital, Lalitpur**



**At Rest Hall after Covishield vaccination
Nurse is interogating the Post vaccine Effect**



**MoU with Nepal Medicity Hospital
Bhainsepati, Lalitpur 2021**

9. Staff Structure

Creator's IVF Nepal Family

2072-2078 BS

2072

STAFFS



Dr. Sanu Maiya Shrestha
Senior Consultant Gynaecologist
Chairman/MD



Mr. Tribeni Man Singha Pradhan
Principal Advisor



Mr. Rahish Lal Shrestha
Board Member



Prof. Dr. Paban Kumar Sharma
Sr. Cons Gynaecologist/Obstetrician



Dr. Shant Man Prajapati
Consultant Anaesthetist



Dr. Kersi Meherji Avari
Scientific Director



Mr. Vivek Jayant Kank
Visiting Embryologist



Ms. Subhadra Pradhan
Consultant Nurse



Mr. Dijan Vaidya
Clinical Embryologist
AMID



Ms. Usha Timsina
OT Nurse



Ms. Sabina Gwachha
Nursing Incharge



Ms. Manita Maharjan
Finance Incharge



Ms. Sophiya Shrestha
Receptionist Incharge



Ms. Anju Tandukar
House Keeping Incharge



Ms. Khushbu Adhikari
Clinical Nurse



Ms. Shrijana Rana
Finance & HR Manager



Ms. Anita Shrestha
Clinical Nurse



Ms. Riya Maharjan
Clinical Nurse



Ms. Saru Maharjan
Clinical Nurse



Ms. Sarita Basnet
Clinical Nurse



Ms. Sabina Shrestha
Clinical Nurse



Ms. Binita Sunwar
Clinical Nurse



Mr. Bishnu Chaudhary
Anaesthetic Assistant



Mr. Sudarshan Tandukar
Pharmacist



Ms. Sabita Thapa
PR Officer



Ms. Punam Karki
Clinical Nurse



Ms. Divya Rana
Clinical Nurse



Ms. Deepa Sharma
Clinical Nurse



Mr. Krishna Musyakhwao
Driver/Technical support



Mr. Binit Kumar Yadav
Technician



Mr. Rajesh Deula
Cleaner



Ms. Lili Thapa Magarni
House Keeping

2073 STAFFS



Dr. Sanu Maiya Shrestha
Senior Consultant Gynaec
Chairman/MD



Mr. Tribeni Man Singh
Principal Advisor



Mr. Rahish Lal Shrestha
Board Member



Prof. Dr. Paban Kumar Sharma
Sr.Cons Gynaec
Obstetrician



Dr. Shant Man Prajapati
Consultant Anaesthetist



Dr. Kersi Meherji Avari
Scientific Director



Mr. Vivek Jayanti Kank
Visiting Embryologist



Dr. Riwaz Acharya
Consultant Radiologist



Dr. Sashmi Manandhar
Junior Cons. Gynaec



Mr. Dijan Vaidya
Clinical Embryologist
AMD



Ms. Usha Timisina
OT Nurse



Ms. Subhadra Pradhan
Consulting Nurse



Ms. Sabina Gwachha
Nursing Incharge



Ms. Manita Maharjan
Finance Incharge



Ms. Sophiya Shrestha
Receptionist Incharge



Ms. Anju Tandukar
House Keeping Incharge



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Finance & HR Manager



Ms. Khushbu Adhikari
Clinical Nurse



Ms. Sweta Adhikari
Clinical Nurse



Ms. Sabita Thapa
PR Officer



Ms. Punam Karki
Clinical Nurse



Ms. Puja Subedi
Clinical Nurse



Ms. Saru Maharjan
Clinical Nurse



Ms. Sarita Basnet
Clinical Nurse



Ms. Binita Sunwar
Clinical Nurse



Ms. Sabina Shrestha
Clinical Nurse



Ms. Anita Shrestha
Clinical Nurse



Ms. Rija Maharjan
Clinical Nurse



Ms. Divya Rana
Clinical Nurse



Mr. Bishnu Chaudhary
Anaesthetic Assistant



Mr. Sudarshan Tandukar
Pharmacist



Mr. Krishna Musyakhwao
Driver/Technical suport



Mr. Binit Kumar Yadav
Technician



Mr. Rajesh Deula
Cleaner



Ms. Lilu Thapa Magarni
House Keeping

2074
STAFFS



Dr. Sanu Mariya Shrestha
Senior Consultant Gynae
Chairman/MD



Mr. Tribeni Man Singha Pradhan
Principal Advisor



Mr. Rabish Lal Shrestha
Board Member



Prof. Dr. Paban Kumar Sharma
Sr. Cons Gynae
Obstetrician



Dr. Shant Man Prajapati
Consultant Anaesthetist



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Scientific Director



Mr. Vivek Jayant Kank
Visiting Embryologist



Dr. Riwarz Acharya
Consultant Radiologist



Dr. Ravi Ram Shrestha
Consultant Anaesthetist



Dr. Akriti Bharati
Junior Cons. Gynae



Mr. Dijan Vaidya
Clinical Embryologist
AMD



Ms. Subhadra Pradhan
Consultant Nurse



Ms. Usha Timsina
OT Nurse



Ms. Sabina Gwachha
Nursing Incharge



Ms. Manita Maharjan
Finance Incharge



Ms. Sophiya Shrestha
Receptionist Incharge



Ms. Sajana Shrestha
Administrative Incharge



Ms. Shital Shakya
Pharmacist



Ms. Anju Tandukar
House Keeping Incharge



Ms. Shrijana Rana
Finance & HR Manager



Ms. Khushbu Adhikari
Clinical Nurse



Ms. Sweta Adhikari
Clinical Nurse



Ms. Binita Sunwar
Clinical Nurse



Ms. Sabina Shrestha
Clinical Nurse



Ms. Sarita Basnet
Clinical Nurse



Ms. Reena Khyaju
Clinical Nurse



Ms. Puja Subedi
Clinical Nurse



Mr. Sudarshan Tandukar
Pharmacist



Ms. Sabita Thapa
PR Officer



Mr. Krishna Musyakhwao
Driver/Technical support



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Anaesthetic Assistant



Mr. Binit Kumar Yadav
Technician



Mr. Arun Deula
Cleaner



Ms. Lili Thapa Magarmi
House Keeping



Mr. Rajesh Deula
Cleaner

2075
STAFFS



Dr. Sanu Maiya Shrestha
Senior Consultant Gynae
Chairman/MD



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Principal Advisor



Mr. Rahish Lal Shrestha
Board Member



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Sr. Cons Gynae
Obstetrician



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Clinical Nurse



Ms. Sweta Adhikari
Clinical Nurse



Ms. Surita Basnet
Clinical Nurse



Ms. Reena Khyaju
Clinical Nurse



Ms. Kajol Bajju
Clinical Nurse



Ms. Sweta Shikhrakar
Clinical Nurse



Ms. Manisha Sunuwar
Asst. Pharmacist



Ms. Pujja Subedi
Clinical Nurse



Ms. Alia Maiya Shakya
Junior Officer



Ms. Rameeta Kamkar
Junior Pharma



Shrijana Maharjan
Clinical Nurse



Mr. Bishnu Chaudhary
Anaesthetic Assistant



Mr. Krishna Musyakhwao
Driver/Technical support
Technician



Mr. Binit Kumar Yadav
Cleaner



Mr. Arun Deula
Cleaner



Ms. Litu Thapa Magarni
House Keeping



Ms. Shova Maharjan
House Keeping

2076
STAFFS



Dr. Sanu Maiya Shreslha
Senior Consultant Gynae
Chairman/MD



Mr. Tribeni Man Singha Pradhan
Principal Advisor



Mr. Rahish Lal Shreslha
Board Member



Prof. Dr. Paban Kumar Sharma
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Consultant Radiologist



Dr. Ravi Ram Shreslha
Consultant Anaesthetist



Mr. Dijan Vaidya
Clinical Embryologist
AMD



Dr. Lakshmi Sunar
Trainee Cons. Gynae



Ms. Subhadra Pradhan
Consultant Nurse



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Ms. Sajana Shreslha
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Ms. Anju Tandukar
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Ms. Anita Karki
Medical Record Incharge



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Clinical Nurse



Ms. Sweta Adhikari
Clinical Nurse



Ms. Sarita Basnet
Clinical Nurse



Ms. Reena Khyaju
Clinical Nurse



Ms. Sweta Shikhrakar
Clinical Nurse



Ms. Kejol Bajju
Clinical Nurse



Mr. Amit Khanal
Lab Assistant



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Asst. Pharmacist



Ms. Shweta Ale Magar
Asst. Account



Ms. Alfa Maiya Shakya
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Anaesthetic Assistant



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Driver/Technical support



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Ms. Shova Maharjan
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Creator's IVF Nepal Family BS 2078 (2021)



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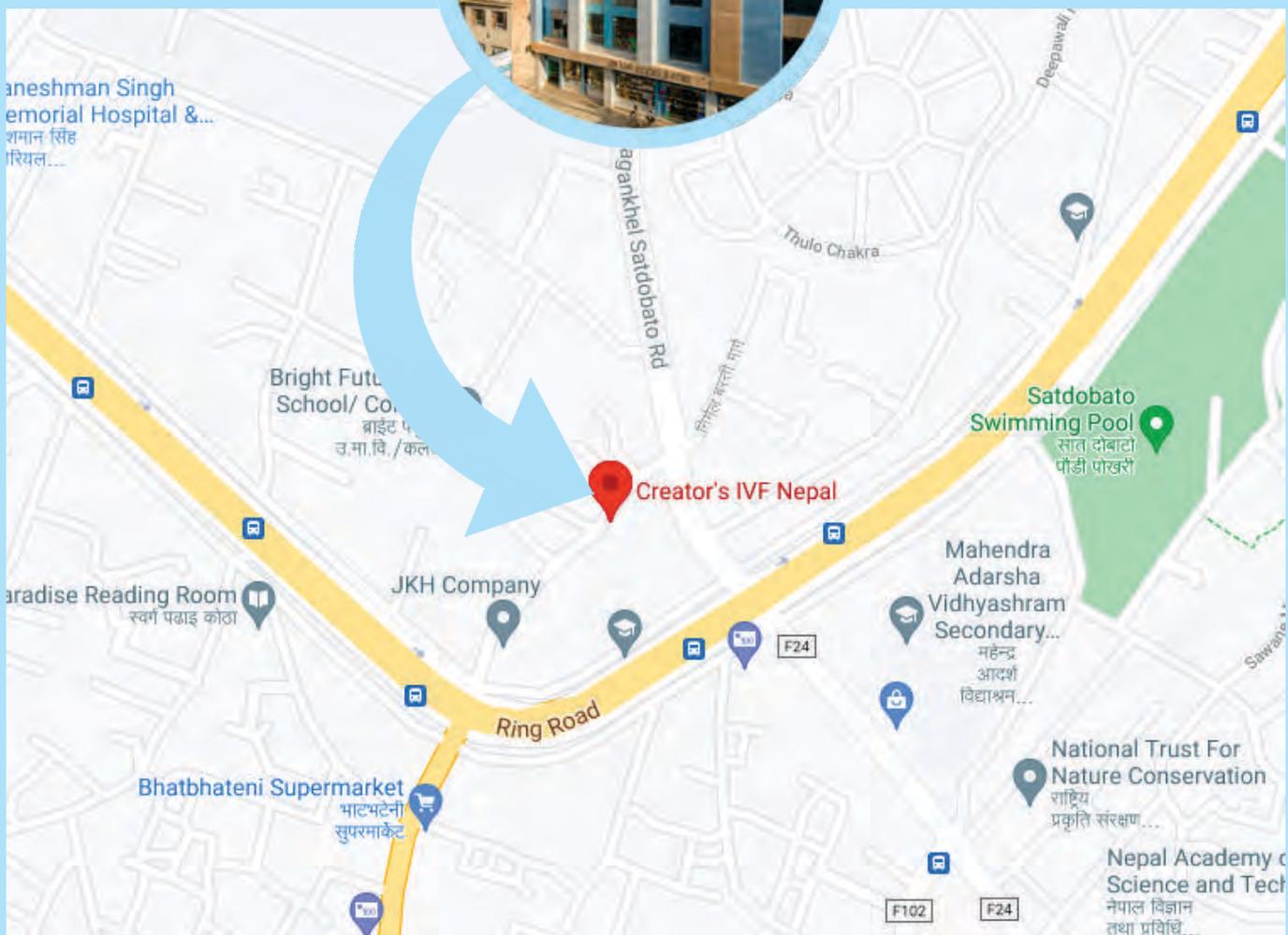
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