

STEMCELL LONGEVITA

Stem Cell Therapy for Infertility: A Patient's Guide

Regenerative Solutions for Reproductive Health



Your Journey to Regenerative Health Starts Here

Table of Contents

Chapter 1

Understanding Infertility

Chapter 2

How Stem Cell Therapy Helps

Chapter 3

Treatment at StemCell Longevita

Chapter 4

Results & Recovery

Chapter 5

Getting Started

Frequently Asked Questions

Medical Disclaimer & Contact

Understanding Infertility

What Is Infertility?

Infertility is defined as the inability to conceive after 12 months of regular unprotected intercourse (or 6 months for women over 35). It affects approximately 15% of couples worldwide. Female infertility factors include diminished ovarian reserve, premature ovarian insufficiency, endometriosis, and uterine conditions. Male factors include low sperm count, poor motility, and structural abnormalities.

Common Causes

- Diminished Ovarian Reserve (DOR) — Reduced number and quality of eggs, often age-related.
- Premature Ovarian Insufficiency (POI) — Ovarian failure before age 40, causing early menopause-like symptoms.
- Endometriosis — Tissue similar to uterine lining grows outside the uterus, damaging reproductive organs.
- Thin endometrium — Inadequate uterine lining thickness preventing embryo implantation.
- Male factor — Low sperm count, poor morphology, or reduced motility.

Age-related decline in ovarian function is the most common cause of female infertility. Stem cell therapy offers hope by potentially rejuvenating ovarian tissue and improving egg quality.

CHAPTER 2

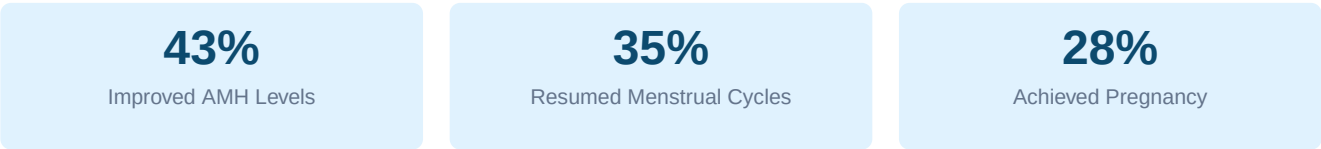
How Stem Cell Therapy Helps

Reproductive Regeneration

MSC therapy for infertility works by promoting angiogenesis in ovarian tissue to improve blood supply and follicular health, secreting growth factors that stimulate dormant follicles, reducing the inflammatory environment associated with endometriosis, improving endometrial receptivity for embryo implantation, and potentially improving egg quality through paracrine effects on ovarian follicles.

Clinical studies have shown that intra-ovarian MSC injection improved AMH levels (a key marker of ovarian reserve) and resulted in natural or IVF-assisted pregnancies in women previously diagnosed with diminished ovarian reserve.

Research Outcomes



Treatment at StemCell Longevita

Our Fertility Protocol

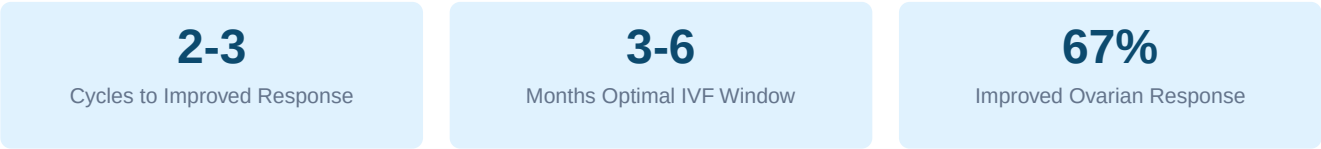
Treatment includes transvaginal ultrasound-guided intra-ovarian injection of MSCs to directly target ovarian tissue, combined with IV infusion for systemic reproductive health support. For thin endometrium, intrauterine MSC delivery is also available. Treatment is coordinated with your fertility specialist and IVF clinic for optimal timing.

Treatment Process

- Day 1 — Comprehensive fertility evaluation including hormonal panel (AMH, FSH, E2), transvaginal ultrasound, and medical history review.
- Day 2 — Intra-ovarian MSC injection under transvaginal ultrasound guidance and IV infusion.
- Day 3 — Follow-up assessment and coordination with your fertility team for next steps.

Expected Timeline

Hormonal improvements (AMH, FSH) may be detectable within 4 to 8 weeks. Ovarian response to stimulation may improve within 2 to 3 menstrual cycles. The optimal window for IVF following stem cell therapy is typically 3 to 6 months after treatment, when the regenerative effects are most active.



Getting Started

Next Steps

If you are struggling with infertility and have not achieved success with conventional treatments, contact us with your fertility assessments and hormone levels for a free evaluation. Our reproductive specialist will discuss how stem cell therapy can support your journey to parenthood.

Frequently Asked Questions

Can stem cell therapy help me get pregnant naturally?

Some patients have achieved natural pregnancies after stem cell therapy for diminished ovarian reserve. However, most patients combine stem cell therapy with IVF for the best chance of success.

Is stem cell therapy safe during fertility treatments?

Yes, MSC therapy has been safely combined with IVF protocols. Treatment timing is coordinated with your IVF cycle for optimal results.

What is the success rate for achieving pregnancy?

Success rates vary based on age, underlying cause, and severity of infertility. In clinical studies, approximately 28-35% of treated patients achieved pregnancy. Results are best for patients under 40 with diminished ovarian reserve.

Can men benefit from stem cell therapy for infertility?

Yes, early research suggests that MSC therapy may improve sperm parameters in some cases of male infertility. Our team evaluates both partners when assessing treatment options.

Medical Disclaimer

The information contained in this guide is provided for educational purposes only and is not intended as medical advice, diagnosis, or treatment. Stem cell therapy outcomes vary by individual, and no specific results are guaranteed. The content herein reflects current scientific understanding and clinical experience as of the publication date but is subject to change as new research emerges. Always consult with a qualified healthcare professional before making any medical decisions. StemCell Longevita and its affiliated practitioners are not responsible for any actions taken based on the information in this guide. All medical treatments carry inherent risks, and patients should discuss potential benefits, risks, and alternatives with their treating physician.

Ready to Begin Your Healing Journey?

Our team of regenerative medicine specialists is ready to evaluate your case and create a personalized treatment plan.

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