

Letrozole is an oral medication which can be used as an effective fertility treatment in women with ovulation problems, or unexplained infertility.

How does Letrozole work:

Letrozole is in a class of drug called aromatase inhibitors. When the enzyme aromatase is inhibited by Letrozole, estrogen levels are suppressed in women. This results in the brain and pituitary gland increasing the output of FSH (follicle stimulating hormone). FSH can cause the development of ovulation in women who are not ovulating or increase the number of eggs developing in the ovaries of women who already ovulate.

What does and when do I take Letrozole:

Three dose regimens have been tested: 2.5 mg, 5 mg, and 7.5 mg. The usual starting dose is 2.5 mg, taken for five days during the menstrual cycle. The appropriate dose will be determined by your provider during your office visit between days 1 and 4 of your cycle (this will involve a pelvic exam to palpate your ovaries).

When will I ovulate:

Once you are taking the proper dose, you should ovulate between 5 and 8 days after the last tablet is taken. You may also use ovulation predictor kits (OPKs) or basal body temperature charts (BBTs) to monitor ovulation.

When should I have intercourse:

You should have intercourse at least every other day, beginning the 3rd day after your last tablet.

Statistics:

Treatment with Letrozole may still be successful even if other treatments have failed. Some data shows that women, who did not ovulate with Clomid, may still ovulate with Letrozole.

What are common side effects:

- Headaches
 - Hot Flashes
 - Nausea
 - Joint Pain
 - Breast Tenderness
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