

FOR FREE DISTRIBUTION WITH IVF INDIA - BEST OF THE BEST 2013 - 14 ISSUE

POWER | BRAND

**2 EXTRAORDINARY CENTRES,
MORE THAN 2000 IVF CYCLES EVERY YEAR,
MORE THAN 1,000 PREGNANCIES
1 POWER BRAND**



INSTITUTE OF HUMAN REPRODUCTION



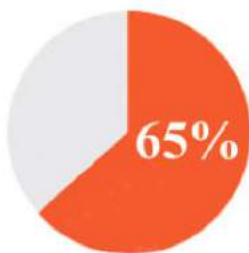
IHR's IVF Success rate goes up to 65% with Frozen Embryo Transfer (FET)



IHR's IVF Protocol:

- **No fresh transfers at all.**
- **Electively freeze all embryos.**
- **Transfers only in the next cycle.**
- **Only blastocyst single embryo transfer**
- **Only vitrification**

Success rate



Frozen Embryo Transfer



Fresh Embryo Transfer



“Aim for success, not perfection. Never give up your right to be wrong, because then you will lose the ability to learn new things and move forward with your life.”

Dr. David M. Burns



Dr. M. L. Goenka

DIRECTOR, Institute of Human Reproduction



“

For us at IHR and me in particular, the challenge to achieve the impossible is the biggest motivator. We try to evolve with each new challenge so that we can put a smile on as many faces as possible.

”

Dedicated excellence makes us different

Dr Goenka has seen the IVF revolution in India from close quarters. In the decade of the 80s, IVF was in a preliminary stage and specialized treatment was not easily available. Dr M.L. Goenka often felt concerned at the fact that with the only option being artificial insemination, there were a lot of cases which did not respond to normal treatment. Once in Mumbai he saw that the “4th International Conference on Human Reproduction” was under way in a hotel. He went in and attended the four day conference. The experience had a stimulating effect on him and he decided to take up this discipline as his specialization. Upon his return, he converted his general nursing home in Guwahati to a specialized infertility care centre. And thus began a journey which has won him many accolades.

Dr ML Goenka is today the Director of Institute of Human Reproduction, Guwahati and Kolkata. He started the first IVF Centre in North East India at Guwahati and has so far delivered more than 5000 test tube babies.

The biggest difficulty in setting up the centre was in procurement and delivery of right kind of equipment. He had to frequently travel abroad to get what he needed. The area of infertility treatment was at a very nascent stage at that time. In 1980 he went to Bombay to learn laparoscopy and hysteroscopy, in 1984 he went to San Francisco, USA to learn microsurgery and in 1987 to Germany for advanced laparoscopic surgery. In 1989 he realized that IVF was now essential, since they were already doing laparoscopic surgeries, IUI etc. Without IVF a lot of patients would not get the relief they wanted. Then he went to the famed Bourn Hall Clinic in UK. After that he met Dr. Robert Janson of Sydney IVF in Bombay at one of the conferences. Dr Goenka went to Sydney IVF stayed there for three months. After returning from Sydney he started first IVF centre of North-East India in 1990. His first test tube baby was born in 1992.

The patient was 52 years old, and was the eldest lady to conceive at that time which gave them a lot of press coverage and their name was introduced in the Limca Book of Records and remained there for three years for this feat.

Dr Goenka had to struggle for two years to set up his centre. He says that today if one wants to start an IVF centre this can be done in a month's time which was not the case earlier. Culture media were difficult to get. There was shortage of qualified people and you had to go from country to country to get the technical knowhow which a lot of people were not willing to share with you and you had to fight every step of the way. He started preparing most of the media in-house. At present also many medias are prepared at IHR with strict quality control. It was with his meticulous planning that he has been able to achieve financial strength to procure the latest equipment and technology as per requirement.

He had been born and brought up in Guwahati and had an established medical practice. Thus, Guwahati was the obvious choice to start his IVF centre. The Kolkata centre was started in 2007 after he realized that it was easy for overseas patients to come there as compared to Guwahati. He says he has planned his growth and revenues in such a way that he never had to face any kind of a financial crunch. All the treatments are available at both centres but in Kolkata, they do a lot of surrogacy.

Dr Goenka was Executive member of Indian Society of Assisted Reproduction (ISAR) and has been a Member of international advisory committee for 11th and 12th World congress on IVF at Sydney and Buenos Aires in 1999 and 2002.

He has also trained more than 200 doctors in IVF / ICSI / IUI and laparoscopy

He has been guest speaker at many national and international conferences. He has published many papers in national and international Journals.



Find somebody to be successful for. Raise their hopes. Think of their needs.

Barack Obama

Dr. Deepak Goenka

Director, Institute of Human Reproduction, Guwahati



IHR's high success rate, the extraordinary level of patient care and the advantage of having all facilities under one roof is what attracts patients from all parts of India, Nepal & Bangladesh.

Personalised patient care is key to success

Dr Deepak Goenka is Director, Institute of Human Reproduction, Guwahati, he had extensive training in Ultrasound, Assisted Reproductive Technology and Genetics at different leading centres of the world. He has performed more than 15000 IVF cycles and more than 2000 laparoscopy surgeries.

The Institute of Human Reproduction has its origins in Guwahati in 1978. Earlier it was a general hospital, and infertility treatment started from 1980. Initially all the work was done by Dr. M.L. Goenka. After completing his MBBS and he went to Sydney, Australia for advanced training in embryology in 1996. He completed his MD in the year 2000 from Kasturba medical college, Manipal. He received trainings in genetics from Dr Joyce Harper, UCL, London; Dr Hema Purandare Mumbai; AIIMS, Gangaram, New Delhi; SGPGI, Lucknow.

He says the IHR -Guwahati is located in the heart of the city and is getting patients from all the seven North-Eastern states, other parts of country like Kerala, Delhi and Rajasthan, Nepal, and Middle East. He ascribes this to the centre's success rate, the level of patient care and having all facilities under one roof. There are so many patients who come in the morning, get their procedure done and leave again in the evening.

His hospital offers all kinds of treatment related to infertility. If a treatment is available in any part of the world, it is also available at IHR, Guwahati. He proudly says that it is the only centre in India where PGD (Pre-Implantation Genetic Diagnosis) is used for recurrent pregnancy loss.

Among his most challenging case so far is the one where a couple came to him with a history of secondary infertility and two previous miscarriages. The third pregnancy was still in situ and was diagnosed to be non-viable. They conducted a genetic analysis of the non-viable embryo and found it to be genetically defective. A look at her records showed that her second pregnancy also had the same genetic disorder that we found in the third pregnancy. Unfortunately there were no records available of her first pregnancy. They then investigated both the parents and found them to be healthy. The treatment was started. Then they went ahead with the IVF and did the genetic analysis on all the nine embryos and found that seven were defective and only two were healthy. Both healthy embryos were transferred and the pregnancy was successful and she delivered twins.

This was the first case in India where PGD (Pre-Implantation Genetic Diagnosis) was done for recurrent pregnancy loss.

He gives the credit for the centre's success to the extensive work in PGD. There are a few centers in India where there are good treatment facilities for genetically impaired children. But once a genetically defective child is born, there is very little that one can do apart from taking care of it. Furthermore such a child is an enormous emotional and financial trauma to the parents, siblings and society. At IHR they diagnose genetic defects before birth and thereby prevent such births from occurring.

Special patient care at IHR is also a unique feature. Every patient who walks in at IHR is allocated a 'patient care executive' who takes care of every need of the patient and is available 24X7. If the patient has any problem or requirements to be addressed she contacts the executive directly. They also maintain a high degree of transparency which adds to patient comfort and confidence. Although there are counselors, but he interacts with every patient himself to address all their concerns.

The biggest hurdle that he faces today in providing fertility care services is one of expenses, and the fact that it is not covered under medical insurance. A couple with problem of infertility has nowhere to turn except their own resources.

As for the risk of multiple pregnancies, he says they do not do multiple embryo transfers and multiple pregnancy rate following IVF at IHR is only around 2%.

But the more persistent myths of IVF are: 'IVF is painful.' But this is not correct. With new drugs, injection pain is minimal. Patient is not admitted even for a day. This is a day care procedure.

The second is; 'Bed Rest after IVF'. This again, is not true. A patient can do her normal routine work after the procedure. He says he had patients who come in during their lunch break, do the procedure and go back to office.

The third is; 'IVF babies are not my own'. A lot of patients who come to me have this misconception that it could be someone else's baby which will be transferred. We have to convince them that it is going to be your baby, it is your husband's sperms and your eggs which will be used. Donors are used only when it is absolutely necessary and that too after taking patient into confidence.



Develop success from failures. Discouragement and failure are two of the surest stepping stones to success.

Dale Carnegie

Sunita Patwari

Chief Embryologist, Kolkata

Success in every case is a challenge

Sunita Patwari grew up in an environment of medical sciences as her father was a gynaecologist. She studied science as a natural choice and her father motivated her to take up embryology as the field of work. It was an upcoming field and seeing her natural interest in it, her father guided her to study further and she chose it as her profession. She had her embryology training at Singapore. Fine tunings were taught by Dr Deepak Goenka. She is working as Chief Embryologist at Institute of Human Reproduction, Kolkata since 2007. She is a visiting Embryologist at Institute of Human Reproduction in Guwahati (Assam) since 2004.

For her, every patient is a challenge and she aims at success in every case. "Regardless of apparent similarities, each case is unique and we have to devise a different plan of action in every case." She finds IVF/ICSI very interesting and would like to achieve 100 per cent success every time.

She has performed more than 8000 IVF/ICSI procedures which is a great achievement in this field. She has attended several workshops and conferences in the area of Semiology, IUI, sperm banking, semen analysis, and has acquired extensive training in embryo biopsy. She is known widely for her competence in areas of IVF laboratory routines, Quality Control.

The role of an embryologist in the success rate of an infertility procedure, in her opin-



ion, is crucial. "An embryologist has a very responsible job and a simple error on her part will impact the life of the patient. We have to give our 100 per cent, we have to be fully alert and completely dedicated to our work." Dealing with an embryo is a delicate task and absolutely no chances can be taken in terms of handling, quality and the attention to detail. Listening to her, one marvels at her constant excitement and hope in connection with her discipline.

She is very positive about the future of embryology and believes that great advancements will happen in this field in the near future. She feels advancement in genetics will help a lot in improving IVF success rate.

"Screening of embryos will need a lot of skill and patience, miscarriages will be reduced and we will have to be equipped for all situations through continuous learning," she predicts. But there always be people like her who are dedicated, deeply involved in the subject and follow strict discipline in doing their job that will maintain the importance of embryology in the area of human reproduction and fertility sciences.



Success is the progressive realization of predetermined, worthwhile, personal goals.

Paul J. Meyer

Rashmi Goenka

Chief Embryologist, Guwahati



“Bringing dreams to life” is her passion

their dream to come true. It is thrilling for us to be a part of this process,” she says. The role of an embryologist is crucial in the success of an infertility procedure. She explains that the embryologist maintains quality control and is also responsible for collection of gametes, their handling, giving them an apt environment and culturing the embryos. If there is something even minutely wrong in the work of an embryologist, then the results would be negative.

Till date, the most difficult task she handled was that of oocyte cryopreservation. “It was a challenge when we started it, but soon we got a hit on it and very good results followed. Amidst all work, I would say getting a knack on oocyte cryopreservation is a big achievement,” she says proudly. Now we are preserving lots of oocytes of unmarried girls (like airhostess, senior executives) who are delaying marriage due to various social and economic reasons. Onco-specialists are referring young girls who are suffering from curable malignancies. Post treatment lots of them are free from malignancies but radical surgeries, chemotherapies or radiation treatment leave them infertile. Cryo-preservation of their oocytes before the initiation of treatment gives them a option of parenthood post onco-treatment.

She is confident that in the future, lots of advancements will happen since many advanced studies are going on. “It is a most upcoming and exciting field. Now we are getting on to ovarian tissue cryopreservation,” she says.

She feels blessed to have a job that she enjoys despite the concentration and dedication that it requires. She derives great satisfaction by paying attention to details, developing technical skills, maintaining high quality and patient motivation. She feels privileged that she is in such a field where she can bring dreams to life.

For Rashmi Goenka, it had been a passion to help people facing health-related problems. And when she came to know about embryology as a specialized discipline, she knew this was the field for her.

She passed her M.Sc. in Clinical Embryology from Leeds University, U.K. with distinction. The topic of her thesis was “Sperm selection for ICSI: Conventional method or Hyaluronic Acid binding method”.

She has been working with the Institute of Human Reproduction in Guwahati (Assam) since 2004, earlier as Junior Embryologist and later as senior Embryologist. She keeps conducting workshops on IUI and other subjects of embryology. She does embryo biopsy of all stages confidently. She has done more than 5000 IVF/ICSI cycles.

She has participated in hands-on workshop in association with Sydney IVE, Sydney, Australia and also with International Society of Andrology besides having attended several conferences on Embryology. She finds embryology to be a highly satisfying field of work, where she feels she can provide the greatest joy to people who want a child. The job itself is very challenging, she says, adding that every patient is a challenge. “We want the patients to be happy and



Whosoever desires constant success must change his conduct with the times.

Niccolo Machiavelli

Jewels Of The Crown

The Talented Team IHR



Neelam Agarwal

Director & CEO, IHR KOLKATA

Ms Neelam Agarwal has unmatched experience in hospital management. IHR Kolkata has grown by leaps and bounds under her able guidance. For her progress is implementation of value based systems to achieve pre-decided goals of excellence. She enjoys organising conferences and workshops. She says “during conference and meetings when doctors appreciate your work it encourages us to expand and improve further”. She thinks genetics is the future of IVF and IHR is coming in a big way with all the latest technologies in genetics so that it remains a front runner in the Fertility Management space in India.



Dr. Th. Digel Singh
Reproductive Medicine, Fellow



Dr. Richer Miller Sunn
Reproductive Medicine, Fellow



Dr. Kanchan Murarka
Reproductive Medicine, Fellow



Dr. Smita Das
Consultant Gynaecologist
In-charge Pre Pregnancy Clinic



Dr. Pratibha Pasari
Consultant Gynecologist



Dr. Gitali Devi
Consultant Pathologist



Dr. Hirak Jyoti Das
Consultant Pathologist

Consultant Pediatricians
& Neonatologists



Dr. N. K. Jain



Dr. Rahul Varma



Dr. R. K. Agarwala



Dr. Ranjan Saikia



Dr. D.N. Agarwal



Mrs. Mina Goswami
Yoga Instructor



Dr. N. K. Agarwala
Consultant Sonologist



Dr. Prerona Sarma
Consultant Sonologist



Dr. Nirupama Joshi
Consultant Anaesthetist



Mrs. Ritu Gupta
Counselor



Dr. Jitu Mani Sarma
Yoga Instructor

About IHR Institute of Human Reproduction

Established in 1980, the main purpose of the Institute of Human Reproduction popularly known as IHR, is to provide comprehensive, personalized quality health care to the infertile couples and high risk pregnant patients. Our goal is a happy healthy family with the help of modern and conventional infertility treatments.

The unique super-speciality STATE OF ART institution with its dedicated staff and superlative technology in the field of Assisted Reproductive Technology (ART), Advanced Endoscopic Surgery & Genetic Engineering, is one of the premier name in the field of reproductive medicine in India and outside India. At IHR, we maintain a very high scientist to patient ratio to make sure your embryos are

very well looked after, ensuring your best possible chance of success. They (scientists) are present from the time of egg retrieval till embryo transfer procedures, making sure that their (embryos) environment is just perfect from the moment the egg leaves the body till the moment it is returned to the uterus. Our scientists also put a lot of time into research aspects of infertility and IVF (test tube baby technology). IHR is one of the very few fertility treatment centres in India that primarily funds ongoing research into the advancement of IVF technology. We feel that this aspect of IHR is just as important as the medical treatment of patients in our care. It ensures that our patients have the benefit of the very latest in knowledge and technology.

Why Choose IHR



We frequently read about new ART and endoscopy centers. It is becoming increasingly difficult for the patient to decide who can provide them best care.

What should you look for in any IVF clinic before choosing it?

- How old is the infertility management centre? (the hospital may be very old but may have started infertility services recently).
- How much experience the doctor has in treating infertility? (very important, a very senior O&G practitioner may have very little experience of infertility management and

vice versa. A young practitioner may have specialized his carrier in infertility management only).

- What culture system they are using: important things are Triple gas incubator, micro-drop culture, sequential media?
- Do they have inhouse embryologists?
- Do they have the relevant infrastructure and technology in place?

In simple words, you should look for an experienced infertility specialist (irrespective of age) and an infertility clinic with advanced technology and in house embryologists.

Success is a science; if you have the conditions, you get the result.

Oscar Wilde

The Treatment Process

- You can fix up an appointment at IHR, Kolkata or Guwahati by contacting us by phone or email.
- The first consultation will be with IVF Coordinators who will take your history, record all the previous investigations and treatments. Then you will be directed to one of the senior IVF consultants. All egg pick-ups and Embryo Transfers (ET) are done by senior consultants. With In-house pathology, Endoscopy and sonography services, the couple can avail of all their investigations at the centre itself.
- The fertility treatment cycle begins with a

charted out regimen of Fertility inducing Medications.

- All tests are done at a fixed time for your convenience.
- We have post-op recovery areas/rooms where patients rest after day-care procedures.
- All confirmatory tests for pregnancy are also performed in-house with same-day reporting. Since we started (IHR) in 1980, our focus has been dedication, innovation, excellence, and caring. These are the qualities on which our reputation is and will continue to be based.



Treatment Facilities

Institute of Human Reproduction (IHR) offers a comprehensive range of infertility services under one roof, and we are known for our innovation, integrity, medical and technical excellence, personalized service, and consistent willingness to accept patients facing the most difficult medical challenges. The center has all the facilities required to deliver a full range of services to couples requiring assistance in conceiving. This ensures that patients are required to visit only one site for all stages of their diagnosis and treatments.

SERVICES OFFERED:

1. Routine Laboratory Investigations
2. All hormones Assays
3. Sonography including Trans Vaginal Sonography (TVS)
4. Hysterosalpingography (HSG with Digital X-Ray).
5. IUI (Intrauterine Insemination)
6. Donor Insemination (DI/TID/AID)
7. IVF-ET (Test Tube Baby)
8. ICSI (Intra Cytoplasmic Sperm Injection)
9. TESA (Testicular Sperm Aspiration)
10. Laser Assisted Hatching
11. Oocyte Donation
12. Surrogacy
13. Semen, Egg (oocyte) and Embryo Cryopreservation
14. Habitual Abortion Clinic
15. Sexual Dysfunctions (Infertility related)

Laparoscopy/Hysteroscopy Surgeries:

All advanced Laparoscopic and Hysteroscopic surgeries are performed at IHR.

1. Diagnostic Hysteroscopy
2. Myomectomy
3. Cystectomy
4. Adhesiolysis
5. Uterine Synechia
6. Septum Resection
7. Laparoscopic creation of Neovagina

Genetic Services

1. CVS (Chorionic villi Sampling)
2. Amniocentesis
3. Preimplantation Genetic Screening (PGS)
4. Preimplantation Genetic Diagnosis (PGD)

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If everyone is moving forward together, then success takes care of itself.

Henry Ford

Surrogacy

Surrogacy is an arrangement in which a woman agrees to carry a pregnancy that is genetically unrelated to her and her husband, with the intention to carry it to term and hand over the child to the genetic parents for whom she is acting as a surrogate. The first report of a baby being born by IVF surrogacy was in the year 1985. The earliest mention of natural surrogacy is in the Old Testament of the Bible.

WHO CAN BENEFIT FROM SURROGACY

Although majority of infertility causes can be remedied through conventional medical and surgical treatments or In Vitro Fertilisation (IVF) but there are conditions where surrogacy gives women a chance to raise children. These conditions are:

- Women whose ovaries are producing eggs but they do not have uterus. Their uterus may have been removed (hysterectomy) or they were born without a uterus. This is the most common indication for IVF Surrogacy.
- Women who have suffered repeated miscarriages and are deemed to have little or no chance of carrying a child to term.
- Women who suffer from medical problems such as severe heart and kidney diseases, severe diabetes and in whom a pregnancy would be life threatening.
- Repeated failure of treatment by IVF
- Women with congenital defects.
- Couples in same sex relationship (gay) take recourse to this treatment.

GUIDELINES FOR FOREIGN NATIONALS VISITING INDIA FOR COMMISSIONING SURROGACY

All Foreign national intending to visit India for commissioning surrogacy must comply with following guidelines instituted by the Ministry of External Affairs, Government of India:

1. Foreign nationals visiting India for commissioning surrogacy must apply under the appropriate visa category.
2. The appropriate visa category will be a medical visa failing which Foreigners will be liable for action for violation of visa conditions. It will also be necessary in such cases to ensure that the surrogate mother is not cheated. Therefore, such a visa may only be granted if the following conditions are fulfilled:-
 - i) The foreign man and woman are duly married and the marriage should have sustained at least for two years.
 - ii) A letter from the Embassy of the foreign country in India or the Foreign Ministry of the country should be enclosed with the Visa application stating clearly that (a) the country



Two of our current surrogates

recognizes surrogacy and (b) the child/children to be born to the commissioning couple through the Indian surrogate mother will be permitted entry into their country as a biological child/children of the couple commissioning surrogacy.

iii) The couple will furnish an undertaking that they would take care of the child/children born through surrogacy.

iv) The treatment should be done only at one of the registered ART clinics recognized by ICMR, the list of such clinics will be shared with MEA from time to time.

v) The couple should produce a duly notarized agreement between the applicant couple and the prospective Indian surrogate mother.

3. If any of the above conditions are not fulfilled, the visa application shall be rejected.

4. Before the grant of visa, the foreign couple needs to be told that before leaving India for their return journey 'exit' permission from FRRO/FRO would be required. Before granting 'exit', the FRRO/FRO will see whether the foreign couple is carrying a certificate from the ART clinic concerned regarding the fact that the child/children have been duly taken custody of by the foreigner and that the liabilities towards the Indian surrogate mother have been fully discharged as per the agreement. A copy of the birth certificate(s) of the surrogate child/children will be returned by the FRRO/FRO along with photocopies of the passport and visa of the foreign parents.

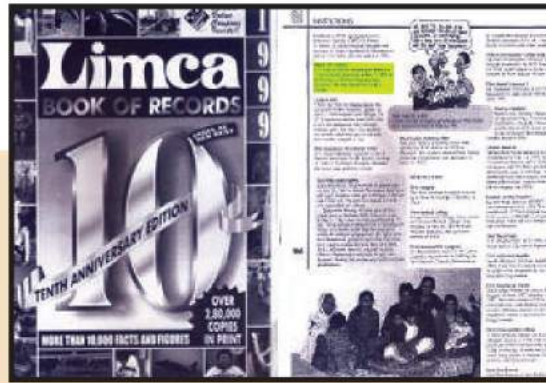
5. It may be noted that for drawing up and executing the agreement cited at Para 2 (v) above, the foreign couple can be permitted to visit India on a reconnaissance trip on tourist visa, but no samples may be given to any clinic during such preliminary visit.



Man needs his difficulties because they are necessary to enjoy success.

Abdul Kalam

OUR FIRST'S



IHR started infertility & endoscopy management in early 1980's, when this whole ART science was very much in infantile stage around the world. This makes Institute of Human Reproduction (IHR) the pioneer in infertility & endoscopy management.

Followings were started for the first time in North East India:

- 1981:** Started IUI in Azoospermic patients using Donor semen.
- 1982:** Started Diagnostic Laparoscopy
- 1983:** Started Diagnostic Hysteroscopy
- 1984:** Started Microsurgery in Reproduction.
- 1991:** Delivered first SIFT (Semen Intra Fallopian Transfer) Baby.
- 1992:** Delivered the First IVF-ET (Test Tube Baby).
- 1994:** Delivered the first GIFT (Gamete Intra Fallopian Transfer) Baby.
- 1996:** Delivered First ICSI Test Tube Baby.
- 1997:** Achieved First TESE-ICSI pregnancy.
- 1997:** Opened first Semen Bank.
- 1998:** Started LASER Assisted Hatching.
- 2001:** Organized the prestigious 7th ISAR Congress.
- 2005:** Opened "Institute of Child Health".
- 2008:** Delivered and successfully sent home the smallest baby girl of NE India on 14/10/08; weighing 700 gms
- 2009:** Successful delivery of a baby with the help of PGD to a parent who had recurrent pregnancy loss.
- 2010:** Successful normal pregnancy to Thalassemia Minor wife and Homogygous Hb_E husband through PGD.
- 2012:** Successfully delivered baby from cryopreserved Oocyte.
- 2013:** 3D Laparoscopic Hysterectomy.



"Success is not final, failure is not fatal: it is the courage to continue that counts."

Winston Churchill

*Our First test tube baby was born in 1992.
The patient was 52 years old, and was the
eldest lady to conceive at that time which gave us a lot of press
coverage and our name was introduced in the Limca Book of
Records and remained there for three years for this feat.*

"IHR is one of the few centres in India to have a Class 10,000 IVF laboratory. At Institute of Human Reproduction, we perform more than 600 fertility related surgeries, 1000 laprascopic surgeries and more than 2000 IVF cycles per year."

IHR, Guwahati



Established in 1978, the main purpose of the Institute of Human Reproduction, popularly known as IHR, is to provide comprehensive, personalized quality health care to the infertile couples & high risk pregnant patients. The unique Super-specialty, STATE OF ART hospital with its dedicated staff and superlative technology in the field of Advanced Endoscopic Surgery, Assisted Reproductive Technology (ART) & Genetic Engineering, IHR is one of the premier name in this field in India and outside India.



Pioneer in infertility and endoscopy management, IHR started when this whole science was in nascent stage and since then has achieved remarkable milestones in the field. Being the first amongst a few in India, to start diagnostic Laparoscopy, diagnostic Hysteroscopy, microsurgery in reproduction and IUI in Azoospermic patients using donor semen.

IHR Guwahati is a 40,000 sq feet Hi-tech facility with over 10,000 sq feet dedicated to fertility services where over 1500 IVF cycles are done every year; a team of 12 gynecologists with facilities of critical care obstetric services a in house blood bank and 4000 deliveries a year. IHR has a team of 8 paediatricians with facilities of NICU and PICU. Out of six OTs, two are dedicated to Laparoscopic surgeries. They are equipped with the latest Storz equipments where about 1000 laparoscopic surgeries are done every year. IHR has full time Anaesthetist, Pathologist & Sonologist. The IVF Lab has two full time embryologist, 3 incubators including one G 185ST, 2 stereoscopic zoom microscopes, 2 ICSI stations (Eppindrof & Narshinge), Laser assisted hatching machine of RI & facilities for cryopreservation of sperms, eggs & embryos.

What makes IHR different is that all facilities are available under one roof starting from investigation, IVF procedure, post IVF pregnancy and baby care. Our goal is a happy, healthy family with the help of modern and conventional infertility treatments.



A great secret of success is to go through life as a man who never gets used up.

*Albert Schweitzer
(1875 - 1965)*

IHR, Kolkata



Spread across 12,000 sq feet, IHR, Kolkata was started in 2007 and boasts of the latest in equipment and expertise. For infertility treatment all facilities are available for the treatment of infertile couples under one roof. We offer IVF, ET, ICSI, Surrogacy, Andrology, Cryopreservation of eggs, sperms and embryos & PGS. All diagnostic facilities are available in house. All biochemistry, Hormones (including AMH) and cultures are in-house. There is a digital x-ray machine with painless procedure for Hysterosalpingography and an advanced Laparoscopic surgery unit.



We have an ultra modern IVF laboratory with 3 incubators (two Minc bench top and one from Forma Scientific, one Olympus SZX16 stereoscopic Zoom microscope, one ICSI station from NARISHIGE with Olympus IX-71 microscope. All work stations are inside vertical laminar airflows to maintain good air quality. Lab Air quality is also maintained by Coda Tower Filters. Air quality is frequently checked by VOC counters. There are four tables for IUI and three tables for Embryo Transfer procedures.



In addition we have three operation theaters: One dedicated to IVF, one for laproscopic surgery and one for other procedures. We have three USG machines: one dedicated to IVF – OT, one (Volution S6) for fetal anomaly scans with 3D and 4D probes and one for routine sonography. Our laparoscopy O.T is well equipped with latest instruments from Storz. All advanced laparoscopic surgeries like myomectomy, chocolate cyst, hysterectomies are done. All facilities are available under one roof starting from investigation till completion of IVF. A full team of gynecologists take care of post IVF pregnancy.



Our vision is dedication, personalised care to all patients and the best success rates. Regular quality controls are done at every step in IVF lab.



Outstation and overseas patients can book their appointments on line. Their travel and hotel stay, local sightseeing can be arranged by our travel partner. One of our patient relationship executive will be assigned to the patient to take care of her queries.

At IHR - Kolkata we do about 600 IVF cycles in a year. 60% of them are donor egg cycles. We do about 5 surrogate cycles and 600 IUI cycles every month.



Always bear in mind that your own resolution to succeed is more important than any one thing.

Abraham Lincoln



Dr. M. L. Goenka with the first test tube baby of North-East India born in 1992 at IHR, Guwahati.



Dr. M.L Goenka attending a Seminar on IVF at BOURNE-HALL Clinic, CAMBRIDGE, U.K, 1989.



Dr. M.L Goenka and Mrs. P.D. Goenka with Dr. Prof. Curt Semm (Father of Laparoscopic Surgery) & Dr. Prof. L. Mettler, at Kyoto, Japan 1994.



Dr. M.L Goenka with Dr. S.C Nag (Head of the Dept. of Reproductive Medicine, Singapore University) during a World Congress on Endoscopy held at Singapore, 1994.



Stop seeing the obstacles you face as reasons why you can't do something. See them as a reason why you can. And celebrate your success on a daily basis.

Ali Vincent



Dr. M.L Goenka with Dr Robert Jansen of Sydney IVF at a Symposium on Infertility and Genetics at IHR, Guwahati in 1996.



Dr.M.L Goenka and Dr. Deepak Goenka with WHO representative, Dr. Daniel Frankin (South Africa) for a Workshop on Seminology,organised at IHR in 2002.

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