

Letrozole Cycles

Letrozole is an oral medication (taken as a tablet by mouth) which can be an effective fertility treatment for women with ovulation issues.

How does it work?

Letrozole is licensed in New Zealand for breast cancer treatment; using Letrozole for fertility treatment is therefore an “off label” use.

1 **Letrozole** is an aromatase inhibitor. Inhibitors stop enzymes like aromatase from working.

When the enzyme aromatase is inhibited by Letrozole, oestrogen levels are lowered.

2 If oestrogen levels are low, the brain and pituitary gland increase the output of follicle stimulating hormone (FSH).

3 FSH stimulates the follicles to start growing. Follicles are important for the growth and release of eggs.

In Women with polycystic ovarian syndrome or issues with ovulation, the increase in FSH can result in development of a mature follicle in the ovary and ovulation of an egg.

This process is called ovulation induction.

How effective is it?

Livebirth rates for women taking Letrozole (27.5% live birth rate) are higher than Clomiphene (19.1% live birth rate) after five cycles (National Institute of Health, 2014).



Some women are ‘resistant’ to Letrozole, which means that they may not ovulate in response to increasing doses. Because of this, it’s important to have a three month review with a doctor to decide if you should continue with Letrozole packages of care.

Risks and Side Effects

Multiple pregnancy

There is a small increase in the number of multiple pregnancies when taking Letrozole. The chance of twins is about 3.4%.

Side effects

Commonly reported side effects are:

- Hot flushes,
- Breast tenderness,
- Headaches

Side effects are usually mild and symptoms quickly improve after stopping the tablets.

Is a Letrozole right for you?

Letrozole may be worth considering if you:

- Have polycystic ovarian syndrome
- Are a couple having ovulation issues and wish to try Letrozole as a first line fertility treatment

How much does it cost?

Letrozole packages are NOT covered under public funding.

Letrozole package of care

Cost: \$485

Includes three email reviewed and monitored cycles and review clinic appointment. Does not include ultrasound.

Single monitored cycle

Cost: \$180

Please note; there is also a prescription cost from the pharmacy with both options. If ovulating regularly, you can think about **unmonitored cycles**. This involves no blood tests and you can get repeat prescriptions from your GP.

	Day of your cycle	What to do
	1	First day of period Email to notify the doctor that your period has started Email fertilitybloodtests@adhb.govt.nz
	2-6	Start taking Letrozole tablets, usually two tablets every day for 5 days. A fertility doctor will email you with more information about your Letrozole cycle. Email fertilitybloodtests@adhb.govt.nz
	10-21	The fertile window can be between day 10 and day 21. Aim to have sex every second day.
	21	First blood test for progesterone level using the form given to you (keep this form for further uses). You will get the result and more instructions by email
	28	Period may start; if so please email doctor to start another cycle OR If your period has not started and your pregnancy test is negative then you may be asked to repeat the progesterone test.
	35	Your period may start from day 28 onwards. Have a pregnancy test on day 28 and day 35 if your period has not arrived

Doses and tests

- Usually for your first cycle the Letrozole dose will be 5mg/day. Women differ in their response and so the dose may be increased to 7.5mg/day. If you ovulate, your dose will remain the same.
- All blood tests are carried out at Lab Tests.
- Letrozole is usually given for a maximum of 12 months.

It is important that you record the dates of any periods or vaginal bleeding and bring this information to any appointments.