

# On the front foot

Talking of working with Salman Khan and Prabhudeva on *Dabangg 3*, Kiccha Sudeep says age has made him agile

BY SUBHA J RAO

Twenty-two years in the film industry and a healthy number of hits behind him later, Sudeep knows the only thing that can keep him on his toes is himself. That means competing with and nudging himself to do better, project after project.

*Dabangg 3*, releasing on December 20, is a Hindi film after a gap, in which he teams up with Salman Khan and choreographer-actor-director Prabhudeva. It is close to midnight when we speak – the actor is finally free after a series of

interviews and recording for *Bigg Boss Kannada*. His interviews in Mumbai have been refreshing, with the actor speaking about what a big fan of Hrithik Roshan his wife, Priya, is, and how they watched *Kaho Na Pyaar Hai* several times in the theatre.

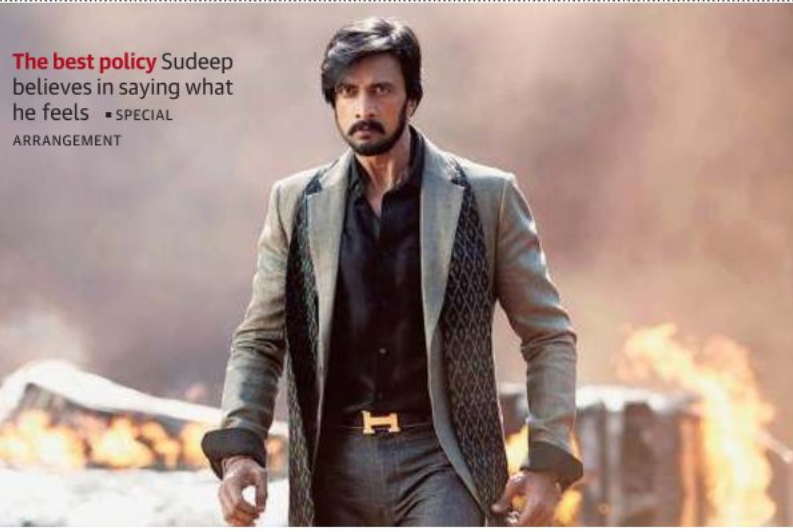
"One needs to be honest, and I have no issues saying what I feel. From where I stand, I have been a fan and admirer of these people. Today, I've got an opportunity to stand with them, work with them... it is fabulous. These are the moments I will cherish. I am not being phi-

losophical, but stardom is not something that stays forever, people do. An honest hello, hug, and warmth are all that will last eventually. I don't want to carry any baggage. I just want to do my work and feel good when I come back home," says Sudeep.

### Full meals

Sudeep, whose last release was the multilingual *Pailwaan*, is no stranger to Hindi films – remember Ram Gopal Varma's *Poonkh*, *Rann* and the *Rakta Charithra* series? "For some reason, whenever I've gone to Mumbai, I have been served what I call 'full meals' – splendid co-stars, director and team. Working with Prabhudeva was great. We have a south Indian connect, we converse in Kannada, Tamil and English. He is clear with his instructions, and allows actors freedom. He steps in only when he wants something extra, which he conveys very sweetly. As for

**The best policy** Sudeep believes in saying what he feels •SPECIAL ARRANGEMENT



Salman (whom I know from Celebrity Cricket League) there is a reason why people love him so. He is giving as a performer too. This is why I said I was the highest paid actor in *Dabangg 3*. The

love and respect made me feel rich. Even Salman did not get that kind of love, because he was the one giving it to all! I now feel I have another family in Mumbai."

Before taking up *Dabangg 3*, Sudeep says he did not even listen to the script. "What excited me was working with this team. And, I am very happy with the way they handled my character. This is not a film where the hero keeps humiliating the villain. There is a lot of respect when it comes to characterisation. We actually confront each other just a couple of times in the film, including the fight in the climax."

As always, Sudeep has dubbed for himself in *Dabangg 3*, and says that it is "performance" too. "I love cinema and it is a relationship I have willingly entered into. I will do what it takes to keep pace and do all that is required to be relevant. I don't like being stagnant. Surprisingly, I realise that with age, I'm more agile. Earlier, I was lazier and I think I was playing on the backfoot," he says, handing out an analogy from his favourite sport, cricket. "Now, I like to play on the front foot."

## A Space Marketing Feature



### Treating Infertility

The joy that children bring to their parents is beautifully expressed in these words of a mother: "Their smiles, their giggles, and their pride in their new accomplishments!! I can have the worst day, come home and listen to my children discuss their days and what they learnt, or overhear them giggling playing a game or watching a movie – and poof!! All is right in my world!!"

But it is not given to every child-seeking couple to easily obtain this joy, one of the main reasons being Infertility, which is often defined as not conceiving after 12 months of regular active married life.

**Infertility is of two types:** Primary infertility refers to couples who have not become pregnant after at least one year of regular active married life without using birth control methods.

Secondary infertility refers to couples who have been able to get pregnant at least once, but are now unable to do so. It is not easy to determine the causes of infertility; there are quite a number of them, including inadequate levels of certain hormones in both men and women, and trouble with ovulation in women. The main symptom of infertility is an inability to get pregnant. In many cases, there are no additional symptoms. Female and male factors each contribute a third each to cases of infertility. In the remaining one-third, the cause is either unknown or could be a combination of both male and female factors. Female infertility causes can be difficult to diagnose.

### Infertility Treatment

Depending on the cause, many treatments are available for infertility. Many infertile couples will go on to conceive a child without treatment, too. Before infertility testing, the doctor tries to understand the couple's habits and suggest some measures to improve their chances of getting a child. In some infertile couples, however, no specific cause is found (unexplained infertility).

Infertility treatment depends on various factors, the main ones being 1) what's causing the infertility, 2) how long it has been so, 3) the partners' ages and 4) their personal preferences. Infertility treatment may involve significant financial, physical, psychological and time commitments from both partners.

Treatments that significantly improve the chances of getting pregnant include hormone treatments, fertility drugs and surgery. In cases where spontaneous pregnancy doesn't happen, couples can often still achieve a pregnancy through Assisted Reproductive Technology (ART),

which uses various medical techniques to fertilise an egg.

### Assisted Reproductive Technology (ART)

ART is any fertility treatment in which the egg and sperm are handled. There are several types of ART, of which In-Vitro fertilization (IVF) is the most common. IVF involves stimulating and retrieving multiple mature eggs, fertilizing them with sperm in a dish in a lab, and implanting the embryos in the uterus several days after fertilization.

### Other techniques used in an IVF cycle include:

**Intra-Cytoplasmic Sperm Injection (ICSI):** A single healthy sperm is injected directly into a mature egg. This technique is often employed when there is poor

semen quality or quantity, or if fertilization attempts during prior IVF cycles failed.

**Assisted Hatching:** This technique assists the implantation of the embryo into the lining of the uterus by opening the outer covering of the embryo (hatching).

**Donor Eggs or Sperm:** Most ART is done using a couple's own eggs and sperm. However, if there are problems with either the eggs or the sperm, an unknown or anonymous donor's eggs / sperm / embryos are used.

**Gestational Carrier:** This is used for women who don't have a functional uterus or for whom pregnancy poses a serious health risk. In this case, the couple's embryo is placed in the uterus of the carrier for pregnancy.

No matter what the res-

ults, you'll face these psychological challenges:

Not achieving pregnancy, or having a miscarriage: The emotional stress of not being able to have a baby can be devastating even in the most loving and affectionate relationships.

**Success:** Even if fertility treatment is successful, it's common to experience stress and fear of failure during pregnancy. If you have a history of depression or anxiety disorder, you're at increased risk of these problems recurring in the months after your child's birth.

**Multiple births:** A successful pregnancy that results in multiple births introduces medical complexities and the likelihood of significant emotional stress both during pregnancy and after delivery.

### Coping with all the uncertainty

As infertility has so many unknowns, coping with it can be an emotionally difficult journey for the couple.

These steps can help them along:

**Set limits:** Decide before starting treatment which procedures, and how many, are emotionally and financially acceptable for you and your partner. Fertility treatments may be expensive and often are not covered by insurance companies, and a successful pregnancy often depends on repeated attempts.

**Consider other options:** Determine alternatives (donor sperm or egg, gestational carrier or adoption, or even having no children) as early as possible in the infertility evaluation. This may reduce anxiety during treatments and feelings of hopelessness if conception doesn't occur.



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## Advanced Fertility Treatments

IVF is a medical procedure for conception in which a woman's egg is fertilized with partner's sperm outside in the lab and the resulting embryo is transferred to the woman's uterus.

Though it's one of the advanced fertility treatments, worldwide success rates of IVF ranges from 30-50%. The success of IVF primarily depends upon age of woman, cause of infertility, Sperm quality, oocyte quality and uterine receptivity.

Although IVF is a well established process, each step is complex and carries with it a chance of failure. So couples may require multiple cycles to achieve a pregnancy.

Here is a guide to help a couple to sail through the journey of ivf smoothly and improve the chance of being successful at the earliest.

- 1) Life style changes-** Maintaining a healthy weight, quitting smoking, avoiding excess alcohol, well balanced diet and exercise.
- 2) Reducing stress-** Several reports suggest improvement of pregnancy outcomes with the use of acupuncture and other stress relieving techniques, like enrolling in mind-body programs, stress reduction, and resilience training workshops.
- 3) Couples should take their multi-vitamin and mineral supplement** which contains vitamins D, A, C, E and B complex, zinc, magnesium, selenium, iron and Co-enzyme Q10.
- 4) Supplements should be continued** to improve egg and sperm quality if your doctor suggests. These may need to be taken for atleast 3 months prior to IVF.
- 5) IVF protocols -** Individualised protocols for ovarian stimulation should be used for each patient rather than blanket therapy.
- 6) Associated gynecological illness** like fibroids, endometrial polyps, endometriosis, adenomyosis, hydrosalpinx should be dealt with before going for embryo transfer in IVF.
- 7) Sperm DNA damage testing (DFI) -** Routine semen parameters like sperm concentration, motility and morphology may not be sufficient to predict pregnancy outcome. ICSI-intracytoplasmic sperm injection can also improve IVF outcome in such cases when sperm analysis is otherwise normal.

DNA damaged sperm can impair fertilization, embryo development, implantation and can also cause miscarriages. Treatment with antioxidants and varicocele surgery can

decrease DFI.

Sperm sorting techniques like MACS and microfluidics can help to sort out best sperm for ICSI.

- 8) TESA-** Testicular sperms have less DNA damage and better DNA integrity. Sperms can be easily aspirated with small needle without much damage and used in ICSI.
- 9) Blastocyst transfer-** embryos that has been grown up to 5 days post fertilization are called blastocysts and they have a better implantation rate compared to day 3 embryos. Only 1/3 of all embryos are capable of growing to this stage.
- 10) Assisted hatching:** when embryo is unable to escape its shell, the Embryologist facilitates the hatching process by laser so that embryo can come out and implant.
- 11) Embryo glue-** Specially developed solution that contain a substance called hyaluron can be used. It has implantation enhancing effect
- 12) Preimplantation Genetic Testing (PGT)-** This is a procedure for genetic testing of IVF embryos by a biopsy prior to transfer and help us to select healthy and chromosomally normal embryo. This improves chances of conception and avoids abortion and birth defects. With this test you can also eliminate the risk of passing genetic disease to your baby.
- 13) ERA:** Endometrial receptivity analysis is a genetic test that evaluates the uterine endometrial lining. It analyses the optimal timing of embryo transfer to promote successful implantation. This is also called Personalised embryo transfer.

Your Fertility Specialist would be the best one to judge what would work the best for you. In case of a failure the couple should not lose hope and instead discuss the causes for failure and go for further advanced tests and procedures for improving success in repeat cycles.



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