IVF: PREGNANCY RATES AND ENDOMETRIOSIS

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Classic 2002 metanalysis including 22 studies

The chance of achieving pregnancy was significantly lower for endometriosis patients (odds ratio, 0.56; 95% confidence interval, 0.44–0.70) when compared with tubal factor controls

Also reported was a decrease in fertilization and implantation rates, and a significant decrease in the number of oocytes retrieved for endometriosis patients

Pregnancy rates for women with severe endometriosis were significantly lower than for women with mild disease (OR, 0.60; 95% CI, 0.42–0.87)





In a population of 717 patients of multiethnic origin that underwent and IVF procedure, 9.5% had a diagnosis of endometriosis (including 3.5% endometrioma patients)

Oocyte quantity, embryo quality, and fertilization rates did not relate to endometriosis

The prevalence of endometriosis appears to be higher in Filipino, Indian, Japanese, and Korean women presenting for IVF treatment than for Caucasian women; however, the discrepancy in IVF outcomes was conditionally independent of the presence of endometriosis





216 endometriosis patients were compared with 209 that presented other causes of infertility.

Patients with endometriosis had significantly lower estradiol on trigger day (9986 \pm 6710 vs 12 220 \pm 9414 pg/mL, respectively) and number of retrieved oocytes (12.7 \pm 8.6 vs 14.0 \pm 10, respectively)

The authors found a consistent decline in clinical and ongoing pregnancy rates with increasing stage of endometriosis

The presence of endometrioma in patients with stages 3 and 4 endometriosis did not alter IVF outcome



Basheer AlKudmani, Itai Gat, Danielle Buell, Joveriyah Salman, Khaled Zohni, Clifford Librach, Prati Sharma. In Vitro Fertilization Success Rates after Surgically Treated Endometriosis and Effect of Time Interval between Surgery and In Vitro Fertilization. Journal of Minimally Invasive Gynecology. Volume 25, Issue 1, Jan 2018, P 99-104



Assisted reproductive technology outcomes were evaluated in a series of 359 endometriosis patients to identify prognostic factors

Endometriotic lesions were classified into 3 phenotypes:

- superficial peritoneal endometriosis
- endometrioma
- deep infiltrating endometriosis

In a total of 720 ART cycles, 158 (44%) patients became pregnant, and 114 (31.8%) had a live birth

Endometriosis phenotype seems to have no impact on ART results

An altered ovarian reserve is associated with decreased pregnancy rates



C MaignienMD, P SantulliMD, PHD, V GayetMD, M-C LafayPilletMD, D KorbMD, M BourdonMD, L MarcellinMD, PHD, D ZieglerMD, CChapronMD. Prognostic factors for assisted reproductive technology in women with endometriosis-related infertility. American J of Obstetrics and Gynecology Vol 216, Iss 3, March 2017, P 280.e1-280.e9



This group studied QOL of endometriosis patients and pregnancy outcomes with IVF

81 endometriosis women (with 142 embryo transfer [ET] cycles) and 605 non-endometriosis women (with 1063 ET cycles) were included

QoL was measured by FertiQoL at the date before ET

QoL scores were significantly associated with successful IVF:

- one unit increase in QoL scores increased 2.5% the chances of ongoing pregnancy
- It also increased 2.8% the chances of livebirth

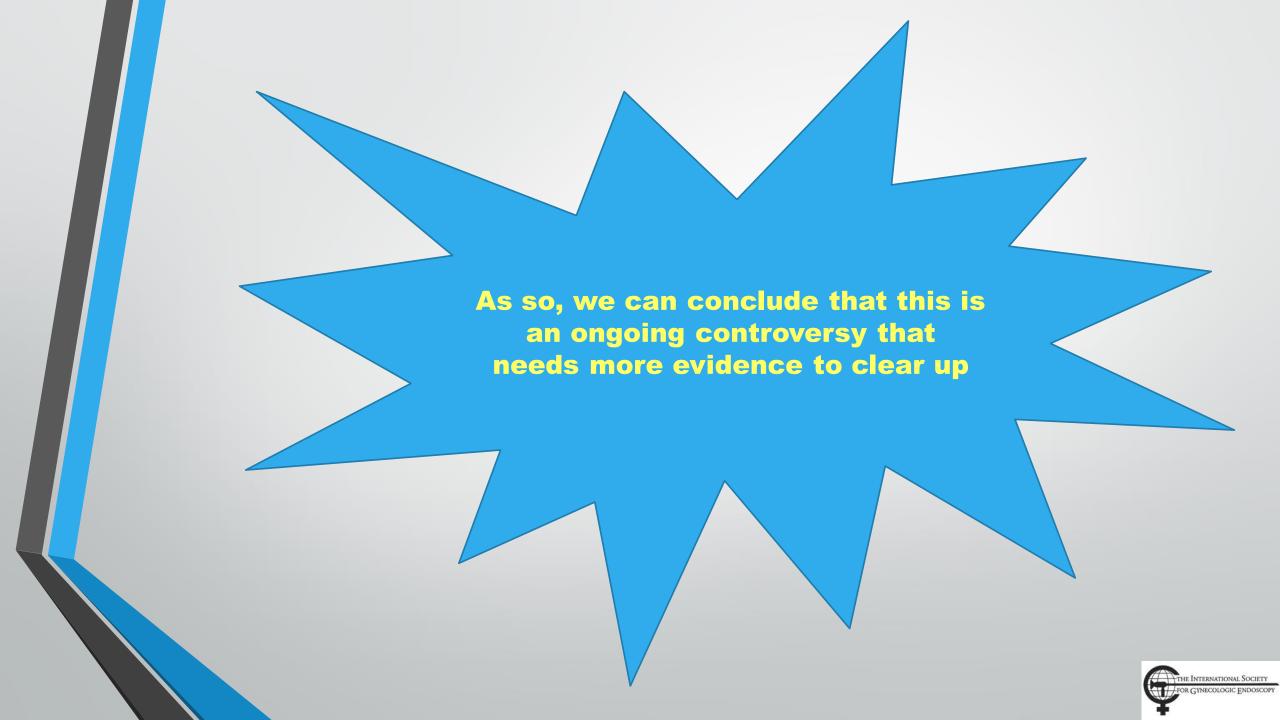
p<.05

This association was also observed among endometriosis women but it did not reach statistical significance.



Meng-Hsing Wu, Pei-Fang Su, Wei-Ying Chu, Chih-Wei Lin, New Geok Huey, Chung-Ying Lin & Huang-Tz Ou (2020) Quality of life among infertile women with endometriosis undergoing IVF treatment and their pregnancy outcomes, Journal of Psychosomatic Obstetrics & Gynecology, DOI:10.1080/0167482X.2020.1758659





IN VITRO FERTILIZATION AND ENDOMETRIOSIS. OUR EXPERIENCE

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The disease, especially at the ovarian site has been shown to have a detrimental impact on ovarian physiology

The local intrafollicular environment of affected patients is characterized by alterations of the granulosa cell compartment including reduced P450 aromatase expression and increased intracellular reactive oxygen species

Ninety-two subjects with endometriosis were included in this retrospective cohort study and compared to a non endo group of 660 patients (Jan 2018/Dec 2019)

Endometriosis was the only cause of infertility in 18 of them

Poor ovarian reserve was present in association to endometriosis in 29 patients



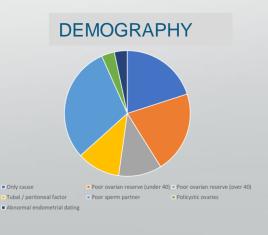
Tubal and peritoneal factor was associated to endometriosis in 10 patients

Other combined causes of infertility were:

- poor sperm quality (27 partners)
- polycystic ovarian syndrome (PCO) in 3 patients
- 3 presented abnormal endometrial dating as measured in previous cycle by ERA

All patients had previous surgery for endometriosis

All procedures were performed by ICSI





RESULTS

| | RESULTS | | Fisher`s Test |
|--|---------------|---------|---------------|
| | ENDOMETRIOSIS | GENERAL | Р |
| Average age | 37 | 38 | p=1 (ns) |
| Mean number of harvested oocytes | 6 | 7 | p=1 (ns) |
| Average of total mature oocytes | 5 | 5 | p=1 (ns) |
| Fertilization rate | 5 | 4 | p=1 (ns) |
| % of patients who underwent embryo transfer | 67 | 72,8 | p=0,44 (ns) |
| % of patients who went to "freeze all" procedure | 20 | 20,3 | p=1 (ns) |
| % of patients with no embryos for transfer | 2 | 3 | p=1 (ns) |
| % of patients with no oocytes harvested of no fertilization at all | 0,7 | 3,4 | p=0,08 (ns) |
| %of patients that froze "excess" embryos after transfer | 45 | 41,8 | p=1 (ns) |
| % of patients who had blastocyst stage embryos | 49 | 51 | p=0,88 (ns) |
| % of cases with Beta HCG subunit positive dosages | 33,33 | 34 | ns |
| n | 92 | 660 | |

No statistical diferences vs. other causes of infertility



IVF by ICSI in our fertility center was equally profitable for couples where the female partner was affected by endometriosis and general population (33.3% pregnancy rates for endometriosis patients vs. 34% for non-endo patients

Contrary to earlier publications, and agreeing with more recent studies, endometriosis "per se" is not at first glance detrimental when those assisted reproductive techniques are applied. In this publication we intentionally did not segmented endometriosis cases by their severity or previous surgical histories.

We outstand the fact that they all had previous surgery for endometriosis, and this could make a difference



Thank you for your attention

