

Effect of ultra-long protocol on the in vitro fertilization/intracytoplasmic sperm injection outcomes in infertile women with adenomyosis: a retrospective cohort study

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Introduction

Adenomyosis has been reported to be associated with worse pregnancy outcome in in vitro fertilization/intracytoplasmic sperm injection (IVF/ICSI) cycles. But the effect of pretreatment with GnRHa of the disease on IVF/ICSI outcomes is still controversial. In this study, we evaluate the influence of ultra-long controlled ovarian stimulation (COH) protocol on IVF/ICSI outcomes in infertile patients with adenomyosis.

Methods

We retrospectively recruited 258 infertile patients suffering from adenomyosis, undergoing fresh IVF/ICSI cycles between 2009 and 2014 in our center. Division into two treatment groups: group 1, ultra-long protocol with one or two months of long term GnRHa pretreatment; group 2, other protocols of ovary stimulation including short and long protocols. Adenomyosis was diagnosed by transvaginal ultrasound. Measures included the basic clinical characteristics, ovarian stimulation factors and main IVF/ICSI outcomes, such as live birth rate, clinical pregnancy rate, miscarriage rate, etc.

Results

There were no statistically significant differences in basic characteristics of both groups. The main IVF-ICSI outcomes between the two treatment protocol subgroups did not differ significantly in terms of live birth rate ($P=1$), clinical pregnancy rate ($P=0.46$), miscarriage rate ($P=1$), biochemical pregnancy rate ($P=0.75$).

Conclusion

Our results suggest that the present ultra-long protocol with one or two months of long term GnRHa pretreatment has no special benefit compared with other protocols on the main outcomes of fresh cycles of IVF-ICSI. Improving the therapy validity for infertile patients with adenomyosis is suggested.

Keywords : Adenomyosis, IVF ? ICSI, Pregnancy outcomes, Cohort study

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