

# Dienogest cycle synchronization for in vitro fertilization in women with deep infiltrating endometriosis

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Introduction: Three main options have been used to achieve cycle programming: first the combined oral contraceptive pill (COCP) (not associated with increased oocyte yield); second, the luteal administration of natural estrogen; third progestogens (potent suppressive effect on pituitary gonadotropin secretion with hypoestrogenic and hypergestagenic local endocrine environment). The aim of the present study was to evaluate the possibility of using dienogest treatment before IVF in women with deep infiltrating endometriosis (DIE) for obtain medical synchronization IVF cycle.

Materials and Methods: An observational cohort of 198 consecutive IVF-ICSI cycles in a tertiary care center between January 2015 and December 2015 was conducted.

Among this group, women with previous histological diagnosis of DIE associated with infertility were included (n=26, aged 27-38 years). A continuous pre-treatment with orally daily dose of dienogest (2 mg once a day) was done for 6 months preceding the presumed onset of the IVF/ICSI cycle. Ovarian hyperstimulation was performed administering recombinant gonadotropins. The dose of gonadotropins was then adjusted according to ovarian response as detected by ultrasound examination.

Results: The beneficial effect of dienogest was observed in women with endometriosis on pituitary suppression and hypoestrogenic effect, improving oocyte retrieved, implantation rate and clinical pregnancy rate, and a reduced miscarriage rate.

Conclusion: Synchronization cycle with dienogest prior to ovarian stimulation for IVF is beneficial to achieving pregnancy in women with DIE. This medical treatment can improve the pelvic microenvironment in infertile endometriotic patients.

Keywords : IVF, deep infiltrating endometriosis, dienogest, cycle synchronization

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