Two-Embryo IVF Has Same Success

BY BETSY BATES
Los Angeles Bureau

RENO, NEV. — Transferring two embryos rather than three in patients undergoing in vitro fertilization resulted in fewer multiple and high-order pregnancies, but no significant diminishment in the total reproductive potential of a single cycle of ovarian stimulation at the Jones Institute for Reproductive Medicine.

Pregnancy rates, implantation rates, and total reproductive potential were similar in a total of 566 two-embryo and three-embryo transfer cycles performed at the Eastern Virginia Medical School, Norfolk, from 2000 to 2004. Dr. Silvina Bocca reported at the annual meeting of the Society for Gynecologic Investigation.

Yet limiting the number of transfers led to a significant reduction in multiple gestations, with twins constituting 21% of two-embryo transfer pregnancies, compared with 30% of three-embryo transfer pregnancies. Rates for triplets were 1% for two embryos and 8% for three.

“We’ve since started going a lot further, to single-embryo transfer,” said Dr. Bocca during an interview at the poster where her data were presented.

Dr. Bocca said it has taken time to convince physicians, as well as patients, of the wisdom of reducing the number of transferred embryos to prevent multiple births. “It’s a huge step,” she said. “It takes an extra 30 minutes talking to patients to explain why it is important to do it. When you talk about the complications of pregnancy, women start to ask themselves, do I want to be on bed rest for 9 months? Do I want my babies to stay in the hospital?”

She also discusses with parents the long-term developmental ramifications for twins and triplets born prematurely.

Patients with repetitive in vitro fertilization (IVF) failure are the most difficult to convince, and their physicians are reluctant to talk about the complications of pregnancy, women start to ask themselves, do I want to be on bed rest for 9 months? Do I want my babies to stay in the hospital?”

Using two rather than three embryos reduced multiple births but not pregnancy or implantation rates, Dr. Silvina Bocca reported.
Fear of Aspiration Is Obsolete

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- vomited once and 17% of whom vomited more than once, compared with 17% and 17% of women in the water-only cohort.

- The most feared complication of food intake during labor—pulmonary aspiration of gastric contents, especially while under general anesthesia—did not occur, said Dr. Liu in an interview at the meeting.

- Hospital and physician policies prohibiting food intake during labor were established in the late 1940s out of fear of the potentially fatal complication. However, anesthesia during labor has changed dramatically in 50 years, with few women undergoing general anesthesia.

- In a recent survey conducted by the U.K. Department of Health, where a liberal food intake policy in labor is common, one case of fatal pulmonary aspiration occurred in 2 million deliveries, said Dr. Liu. Not all women desire food during labor, she noted. “In our experience, about 30% spontaneously wanted to eat.”

- Most preferred light items such as toast or fruits and vegetables. “When labor reached the second stage, very few wanted to eat,” Dr. Liu said.

Rates Excellent

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- as well to transfer only one or two embryos, she said.

- “We had two sets of triplets this year and they were both in women with failed transfer of two embryos,” said Dr. Bocca of the medical school’s department of reproductive medicine.

- In the study, a total of 297 pregnancies were achieved in 459 fresh cycles and 107 subsequent frozen/thawed cycles.

- Patients included women 35 or younger if they were using their own oocytes. Oocyte donors were less than 32 years old.

- All women were stimulated with a combination of a GnRH agonist and recombinant FSH and at least nine mature oocytes were harvested. Selected embryos were transferred on day 3 and remaining concepts of good quality were cryopreserved.

- Among fresh IVF cycles, the clinical pregnancy rates for two- and three-embryo transfers, respectively, were 57% and 52%, while the implantation rates were 36% and 26%.

- For frozen/thawed IVF cycles, the respective IVF pregnancy rates were 52% and 50%; the implantation rates, 29% and 26%. All differences between the two- and three-embryo pregnancy and implantation rates were insignificant.

- Among oocyte donors, clinical pregnancy rates and implantation rates were similar in two- and three-embryo transfers as well.

- Differences in total reproductive potential per cycle for two- and three-embryo transfers were also insignificant: 78% and 66%, respectively, for 269 IVF cycles and 53% and 57%, respectively, for 190 oocyte donation cycles.

- Dr. Bocca’s coinvestigators were Dr. Sergio Oehninger, reproductive medicine division director, and Dr. Laurel Stadtmauer.

Both U.S. physicians said considerable disagreement exists within hospitals about policies concerning food during labor. Obstetricians, anesthesiologists, and nurses often hold contrary positions, and compromises have to be made, they said.

- Medicolegal issues likely play a role.

- “If a woman ate a Big Mac, vomited and aspirated, the lawsuit would be catastrophic,” Dr. Cohen said.

- Dr. Liu, a postdoctoral fellow in the division of reproduction and endocrinology at King’s College, London, presented the study on behalf of associates at King’s College, St. Thomas’ Hospital, London, and Queen Mary’s Hospital, Sidcup, England.

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