

Outcomes Of Natural Cycles Vs. Programmed Cycles For 1390 Frozen Embryo Transfers

Carolyn Givens, M.D., Isabelle Ryan, M.D., Philip Chenette, M.D., Carl Herbert, M.D., Eldon Schriock, M.D., Pacific Fertility Center, San Francisco, CA.

Objective: To compare cycle outcomes when patients with frozen embryos are having the thawed embryo transfer timed to natural ovulation vs. cycles in which the endometrial timing is programmed with estrogen and progesterone in own-egg and ovum donor recipient FETs.

Design: Retrospective database analysis

Setting: A large private ART practice.

Patients: 1145 patients, undergoing 1390 FET cycles with embryos derived from their own eggs (n=785 patients) or from donor egg-derived embryos (n= 360 patients) between January 1, 2000 and December 31, 2005.

Main Outcome Measure(s): Delivered pregnancy and pregnancy loss rates were determined based on whether the endometrial preparation was natural (i.e. an ovulatory cycle) vs. a programmed (sequential exogenous intramuscular estrogen and progesterone). Comparisons were also made for patients undergoing natural and programmed FET cycles using donor egg-derived embryos.

Results:

	Own Eggs- Natural	Own Eggs - Programmed	OD - Natural	OD- Programmed
# Transfers	730	211	113	336
# Pregnant	433	147	67	185
Biochemical	68	19	10	34
Delivered	198	61	30	82
SAB	32	23	4	18
Ectopic	1	1	3	1
TAB	4	1	0	2
#Clinical Pregnancies	234	85	34	102
%Clin Preg/ET	32.05	40.28	30.09	30.36
%Delivered/ET	27.12	28.91	26.55	24.40
%Loss/ET	33.09	24.09	7.09	19.10

Clinical pregnancy (gestational sac on 7 week ultrasound) rates were higher in programmed FET cycles in patients using their own eggs. However, there were no differences in delivered pregnancies between these cycle types.

Clinical pregnancy and delivered pregnancy rates were not different in natural vs. programmed cycles for patients undergoing FET with donor egg-derived embryos.