WHAT TO DO ON WEEKEND WITH THE INTRAUTERINE INSEMINATIONS?

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Introduction: One of the most common problems of the intrauterine insemination (IUI) in publics centres are the weekends and holidays, because the lack of personal to perform the techniques. In those cases you have three options: cancel the cycle, convert it in a timed intercourse, or add an antagonist to prevent the LH surge during the weekend and perform the insemination on Monday.

Objectives: To compare the results (clinic gestations) of the timed intercourse during the weekends against IUI with GnRH antagonists performed on Monday.

Material and Methods: A total of 1,715 IUI with marital semen performed in our Unit from 2006 until 2010 were reviewed. Of these, 218 (12.7%) were on weekend, so we had to put an antagonist and perform them on Monday (group A, 124 cases) or convert them on timed intercourses (group B, 94 cases).

Results: Both groups were similar in age $(32.1 \pm 3.1 \text{ versus } 32.1 \pm 3.1)$, follicles amount in the day of hCG administration $(1.48 \pm 0.6 \text{ versus } 1.50 \pm 0.6)$, or diagnostics: ovulatory dysfunction (18.5% vs 22.3%), unexplained infertility (39.5% vs.47.9%), male factor (29.8% vs 20.2%), mixed causes (8.1% vs 9.6%), or other causes (4.0% vs 0.0%).

The total clinic gestations were 15 (group A, 12.1%) and 9 (group B, 9.6%). There were no statistical differences between groups (OR= 1.30; 95%Cl 0.50 - 3.40).

Conclusions: Both attitudes seem similar in relation to get a clinical pregnancy. Although IUI seems to get a better rate, it is more uncomfortable and expensive than timed intercourse.