Under the auspices of the Royal Thai College of Obstetricians and Gynecologists

ASIAN PACIFIC CONGRESS ON
CONTROVERSIES IN
OBSTETRICS
GYNECOLOGY &
INFERTILITY

November 25 – 28, 2004, Shangri-La Hotel, Bangkok, Thailand

Preliminary Program and Call for Papers

Deadline for the submission of abstracts:
SEPTEMBER 8, 2004

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The Congress is organized under the auspices of

The Royal Thai College of Obstetricians and Gynecologists

and the following national organizations:

The Obstetrics & Gynecological Society of Hong Kong
Obstetrical & Gynecological Society of India
The Indonesian College of Obstetricians and Gynecologists
The Korean Society of Contraception
The Korean Society of Menopause
Malaysian Association of Maternal and Neonatal Health (MAMANEH)
Obstetrical & Gynaecological Society of Singapore
DEAR COLLEAGUES AND FRIENDS,

Following the enormous success of the previous Congresses on Controversies in Obstetrics, Gynecology and Infertility held in Prague, Paris, Washington and Berlin, we invite you to attend and actively participate in the next Congress, to be held in Bangkok, Thailand.

The field of Obstetrics, Gynecology and Infertility is witnessing an enormous expansion in clinical and basic data. Conferences are becoming more and more informative and there is usually limited time for thorough discussion. The Congress on Controversies deals with the most burning questions of our profession and is intended for all gynecologists, regardless of their specialty.

The Asian Pacific Congress aims to bridge the gap between the expansion of information and its consolidation into clinical practice.

Please visit our website (www.kenes.com/controversies) for constant updates and further information on past and future congresses or send an e-mail to cogi@kenes.com in order to be added to our mailing list.

We look forward to welcoming you to Bangkok in November 2004!

Sincerely yours,

Prof. Zion Ben Rafael
Prof. Kamheang Chaturachinda
Prof. Zeev Shoham

Organizing Committee
# PRELIMINARY TIMETABLE

**THURSDAY, NOVEMBER 25, 2004**

**Pre-Congress Course on IVF & ART**

<table>
<thead>
<tr>
<th>Time</th>
<th>Hall A</th>
<th>Hall B</th>
<th>Hall C</th>
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<tbody>
<tr>
<td>08:30 – 10:00</td>
<td>Investigation of the infertile couple</td>
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<tr>
<td>10:00 – 10:30</td>
<td>Coffee Break</td>
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<tr>
<td>10:30 – 12:30</td>
<td>Ovarian stimulation regimens</td>
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<td>12:30 – 13:30</td>
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<td>13:30 – 15:00</td>
<td>Embryo Transfer</td>
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<tr>
<td>15:30 – 17:30</td>
<td>Improving success rate through newer techniques</td>
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**FRIDAY, NOVEMBER 26, 2004**

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<tr>
<td>08:30 – 10:00</td>
<td>Cloning and stem cells</td>
<td>Endometriosis</td>
<td>Gestational diabetes</td>
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<td>10:00 – 10:30</td>
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<td>PCOS</td>
<td>Family Planning</td>
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<td>Thrombophilia in obstetrics and gynecology</td>
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<td>16:30 – 17:30</td>
<td>Treatment before ART</td>
<td>Free Communication Papers</td>
<td>Fetal monitoring</td>
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**SATURDAY, NOVEMBER 27, 2004**

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<td>Conservative treatment of fibroids</td>
<td>Treating menopausal symptoms under the WHI shadow</td>
<td>Coping with infection in obstetrics</td>
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<td>10:30 – 12:30</td>
<td>Minimal Workup Before Infertility Treatment</td>
<td>Sponsored symposium by Schering; More Than Effective Contraception - Mirena IUS</td>
<td>PPH - Post partum hemorrhage prevention and treatment</td>
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<td>Ablation</td>
<td>Severe pre-eclampsia without complications</td>
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<td>New technologies in IVF</td>
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<td>Coffee Break</td>
<td>Laparoscopy</td>
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<td>15:30 – 17:00</td>
<td>Free Communication Papers</td>
<td>Cervical cancer and HPV</td>
<td>Intrauterine growth restriction</td>
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<td>17:00 – 18:30</td>
<td>Practical IVF</td>
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**SUNDAY, NOVEMBER 28, 2004**

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<td>Male infertility</td>
<td>Menopause - adjuvant therapy</td>
<td>Complications of pregnancy and postnatal care</td>
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<tr>
<td>10:30 – 12:30</td>
<td>Pregnancy loss</td>
<td>Ovarian cancer: screening and prophylactic oophorectomy</td>
<td>Hot controversies over delivery</td>
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PRELIMINARY PROGRAM

THURSDAY, NOVEMBER 25, 2004

PRE-CONGRESS COURSE ON IVF & ART: IS THERE A RECIPE FOR SUCCESS?
Chairmen: R. Frydman, V. Gomel, Z. Ben Rafael
The aim: To give a comprehensive update for practitioners in clinical and laboratory aspects of assisted reproduction

INVESTIGATION OF THE INFERTILE COUPLE
1. Are laparoscopy and hysteroscopy necessary before IVF?
2. Assessment of ovarian follicular status in practice
3. Investigation of the infertile male
4. Is LH supplementation necessary?
   Panel Discussion

OVARIAN STIMULATION REGIMENS
1. Principles of controlled ovarian hyperstimulation
2. Antagonists versus agonists? What to prefer?
3. Poor responders and IVF
4. When to cancel an IVF cycle?
5. PCOS and ovarian stimulation
   Panel Discussion

EMBRYO TRANSFER
1. How to improve embryo transfer
2. Single versus two or more embryo transfer
3. How to identify the best embryos? What to do with fragmentation?
   Panel Discussion

IMPROVING SUCCESS RATE THROUGH NEWER TECHNIQUES
1. In-vitro maturation
2. PGD - can it increase pregnancy rate?
3. Cryopreservation of human oocytes, embryos and ovarian tissue
4. New markers for endometrial receptivity
   Panel Discussion
## MAIN CONGRESS PROGRAM

**(FRIDAY, NOVEMBER 26 – SUNDAY, NOVEMBER 28)**

### A. INFERTILITY AND ART

#### CLONING AND STEM CELLS

**Capsule:** Can we differentiate between the risks and benefits?

1. Human umbilical cord or embryonic stem cells, what to prefer? What can be gained?
2. Human cloning - is it now feasible? What are the risks?
3. Nuclear and cytoplasmic transfer - what are the risks?

#### PCOS

**Capsule:** The most common endocrinopathy remains an enigma in many aspects

1. Should Metformin be used routinely for all women with PCOS?
2. Risk of OHSS – is it a real problem?
3. Minimal monitoring of ovarian stimulation – is it safe?
4. Ovarian surgery for PCO. Why is it not more popular?
5. Avoidance of OHSS – step up, step down or other

#### TREATMENT BEFORE ART

**Capsule:** Does the high success rate of IVF and the possibility to control multiple pregnancy dictate progressing directly to IVF?

1. Should treatment with clomiphene citrate continue? What should we offer to failures?
2. Is IUI mandatory before IVF? Natural versus stimulated cycle
3. Should we proceed directly to IVF? Reducing the multiple pregnancies risks

#### CONSERVATIVE TREATMENT OF FIBROIDS

**Capsule:** Delaying childbearing increases the need for conservative treatment of fibroids

1. Management of intramural fibroids before treatment - is it important?
2. Is there a place for GnRH agonists before myomectomy?
3. Current state of fibroids embolization

#### NEW TECHNOLOGIES IN IVF

**Capsule:** With all the technological improvements the question remains, are we progressing?

1. Does ART increase imprinting disorder?
2. Blastomere transplantation in early embryos?
3. Sex selection for non-genetic reasons
PRACTICAL IVF

Capsule: Many practical issues are unsettled
1. Should we limit the number of embryo transferred?
2. Does ET technique matter?
3. GIFT AND ZIFT. Why are they disappearing?

MINIMAL WORKUP BEFORE INFERTILITY TREATMENT

Capsule: Can we do without some of the tests?
1. Basal hormonal test – are they required?
2. Is sophisticated sperm analysis ever required?
3. Simplification of IVF

MALE INFERTILITY

Capsule: Can all problems be overcome with ICSI?
1. Varicocelectomy - should we treat and how?
2. Should we treat Kleinfelter Syndrome?
3. Does environmental pollution affect human reproduction?
4. Erectile dysfunctions - what are the options?

PREGNANCY LOSS

Capsule: Confusion exists over the treatment of this common condition
1. Early pregnancy loss in IVF, is there any treatment?
2. The end of immunotherapy
3. Can PGD overcome recurrent pregnancy failure?
4. Maternal autoimmune disease - can it affect future generations?

B. GYNECOLOGY/MENOPAUSE AND FAMILY PLANNING

ENDOMETRIOSIS

Capsule: Can we choose between the many options of therapy of this poorly understood condition?
1. Michelin guide to surgery
2. Endometrioma: IVF or operation - which comes first?
3. Surgical vs. medical therapy
THE DROSPIRENONE BENEFIT FROM CONTRACEPTION TO POST-MENOPAUSE

Sponsored Symposium by Schering
1. Progestins: are they all the same
2. Yasmin: added value in contraception
3. Angeliq: a new HRT option

FAMILY PLANNING

Capsule: Will the innovative methods of family planning replace the Pill?
1. Will the patch replace the Pill?
2. The progesterone IUS – just a contraceptive?
3. The future of permanent female contraception

TREATING MENOPAUSAL SYMPTOMS UNDER THE WHI SHADOW

Capsule: WHI results indicates an increase risk of CVD, does it also indicate the end of HRT?
1. Does increased risk of breast cancer preclude the use of hormones?
2. Is HRT only for hot flushes?
3. The use of progestogens magnifies the risks observed in WHI
4. Osteoporosis prevention/management with non-hormonal therapy
MORE THAN EFFECTIVE CONTRACEPTION - MIRENA IUS

Sponsored Symposium by Schering
1. Contraception with additional benefits
2. The importance of counselling
3. Mirena use according to life stage

ABLATION

Capsule: The jury is still out on the many new hi-tech devices for ablation. Is it possible to decide what the future holds?
Round table discussion:
1. Can we agree on preliminary indications and workup?
2. Hysteroscopy versus newer techniques?
3. Can second generation endometrial ablation reduce the incidence of hysterectomy?

LAPAROSCOPY

Capsule: Laparoscopy is emerging as a practical tool in advanced surgery
1. Transvaginal 3-D US with serum CA-125 level for diagnosis of pelvic adhesions before laparoscopic surgery
2. Laparoscopic transabdominal cervicoisthmic cerclage during pregnancy
3. Laparoscopic removal of large myomas
4. GnRH analogues before hysterectomy or myomectomy

CERVICAL CANCER AND HPV

Capsule: Should we screen for this risk factor? Can we prevent it?
1. HPV DNA typing has no role in the routine evaluation of the abnormal Pap smear
2. HPV vaccines - why aren’t they the answer yet?
3. Cervical pre-malignant changes do not begin until CIN II

MENOPAUSE – ADJUVANT THERAPY

Capsule: Adjuvant therapies for HRT are now widely used. What is the proof of their efficacy?
1. Is androgen therapy safe? Does deficiency exist?
2. DHEA for longevity and quality of life?
3. GH for post-menopausal women
4. Efficacy of transdermal estradiol gels
MAIN PROGRAM
(CONTINUED)

OVARIAN CANCER: SCREENING AND PROPHYLACTIC OOPHORECTOMY

Capsule: Delayed diagnosis of ovarian cancer is the major problem affecting prognosis - can we diagnose it earlier
1. The place of biochemical testing
2. Incidental prophylactic oophorectomy during abdominal surgery
3. The role of genetic testing for breast and ovarian cancer - is it for research or a clinical tool?
4. Prophylactic oophorectomy in BRCA carriers with or without hysterectomy

GESTATIONAL DIABETES

Capsule: Despite increasing knowledge basic aspects are still unclear
1. Should we screen and how?
2. Can fetal weight be estimated accurately?
3. Can macrosomia be prevented?
4. Can shoulder dystocia be prevented?

PRENATAL SCREENING AND DIAGNOSIS

Capsule: There is still no agreed policy on how best to screen for fetal anomalies
1. Prenatal ultrasound screening is best done in the first trimester
2. Does 3D ultrasound contribute significantly to anomaly detection?
3. The role of ultrasound markers in the second trimester

THROMBOPHILIA IN OBSTETRICS AND GYNECOLOGY

Capsule: Can screening and treatment of thrombophilia prevent complications?
1. Thrombophilia 2004 - Overview
2. What is the evidence for the relation of thrombophilia to adverse pregnancy outcome?
3. The value of LMWH treatment in OB/GYN?
4. Genetic thrombophilias and contraception
FETAL MONITORING

Capsule: After 30 years of experience, the question remains
1. Is there a place for electronic fetal monitoring in the low risk patient?
   Pros and cons
2. Does it increase CS rate? Is there an optimal CS rate?
   Pros and cons

COPING WITH INFECTION IN OBSTETRICS

Capsule: Controversies exist regarding aspects of screening and management of infectious disease during pregnancy
1. HIV in pregnancy – what’s next?
2. Preterm labor, infection and Cerebral Palsy
3. GBS: who, when and which screening approach should be used for GBS screening and intra-partum therapy?
4. CMV – time for screening?

PPH-POST PARTUM HEMORRHAGE PREVENTION AND TREATMENT

Capsule: PPH remains a major threat for mothers
1. Prevention and management of PPH; is the first choice Oxytocin or Misoprostol?
2. Surgical options for PPH; Internal Iliac should be the choice and then hysterectomy
3. ‘Tamponade test’ and compression suture should be the choice and hysterectomy in exceptional cases
4. Novo seven- a new option for life threatening hemorrhages
5. Are the present definitions of post-partum hemorrhage of value or do they delude us?

SEVERE PRE-ECLAMPSIA WITHOUT COMPLICATIONS

Capsule: Can we decrease mortality and morbidity in complicated cases?
1. Severe pre-eclampsia at the limit of viability - Is there a role for expected management?
2. When pregnancies should be induced severe pre-eclampsia?
3. Is MgSO4 for prevention or only therapeutic?
INTRAUTERINE GROWTH RESTRICTION

**Capsule:** What are the most appropriate strategies for preventing complications due to growth problems?
1. Epidemiology and perinatal sequelae
2. Fetal growth potential
3. Fetal growth in twins
4. Ultrasound and clinical assessment

COMPLICATIONS OF PREGNANCY AND POSTNATAL CARE

**Capsule:** State of the art: care for the fetus and newborn in 2004 - where is the evidence?
1. Perinatal and neonatal dilemmas at the limits of viability
2. Postnatal steroid therapy and other adverse influences on the neonatal brain
3. NST and BPP in the management of the IUGR fetus: are we delivering too late?
4. The role of vaginal birth after Caesarian section
5. Surfactant and other respiratory therapy – is there any hard evidence?

HOT CONTROVERSIES OVER DELIVERY

**Capsule:** Many questions over the risks of delivery remain unanswered
1. Is there any controversy over breech deliveries? External cephalic version in modern obstetrics – risk vs. benefits?
2. CS on demand
3. Who is afraid of the older mother of multiples?
4. Who's afraid of triplets; should we always reduce triplets?
GENERAL INFORMATION

CONGRESS VENUE
Shangri-La Hotel, 89 Soi Wat Suan Plu, New Road, Bangrak, Bangkok, 10500, Thailand

REGISTRATION FEES

<table>
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<tr>
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<th>Early Before August 24, 2004</th>
<th>Late From August 24 – November 19, 2004</th>
<th>On Site From November 19, 2004</th>
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<tr>
<td>Participant</td>
<td>US$490</td>
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<td>One-day Pre Congress Workshop</td>
<td>US$150</td>
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Registration includes: participation in scientific sessions, Congress bag, Program and Abstract Book, all printed material of the Congress, invitation to the Get-Together Reception, lunch on Friday November 26 and Saturday, November 27.

Please register using the on-line form at the website www.kenes.com/asiancogi, or the enclosed registration form.

CANCELLATION POLICY
Fees will be refunded with a 25% deduction if notification of cancellation is received (by fax or email) before September 24, 2004. Between September 24 and October 24 there will be a 50% refund. After this date no refunds can be made.

PAYMENT
Payment of registration can be made through the Congress website using a credit card or by sending the Secretariat a cheque or bank transfer. Further details are available on the registration information page of the Congress website.

LETTER OF INVITATION
A formal letter of invitation will be supplied by the Secretariat on request. Please contact cogi@kenes.com

LIABILITY
The Congress Secretariat and Organizers cannot accept liability for personal accidents or loss of or damage to private property of participants either during or directly arising from the Asian Pacific Congress on Controversies in Obstetrics, Gynecology and Infertility. Participants should make their own arrangements with respect to health and travel insurance.
GENERAL INFORMATION (CONTINUED)

EXHIBITION
An exhibition will take place in conjunction with the Congress. For further details, please contact the Secretariat.

SECRETARIAT AND CONGRESS ORGANIZERS
Please address all correspondence to:

KENES International
Cares for your Organization
17 Rue du Cendrier
P.O. Box 1726
CH-1211 Geneva 1
Switzerland
Tel: +41 22 908 0488
Fax: +41 22 732 2850
E-mail: cogi@kenes.com
Visit the website for frequent updates: www.kenes.com/asiancogi

ACCOMMODATION
17 Rue du Cendrier
CH-1211 Geneva 1
Switzerland
Tel: +41 22 908 0488 Fax: +41 22 732 2850
E-mail: apcogi_reg@kenes.com

Kenes International will be offering special reduced rates for accommodation.

Accommodation at special congress rates has been reserved at the Congress venue:

<table>
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<th>Hotel</th>
<th>Category</th>
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<tr>
<td>Shangri-La Hotel</td>
<td>* * * *</td>
<td>US$ 180</td>
<td>US$ 195</td>
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Rates quoted are per room, per night, including breakfast and taxes.
GENERAL INFORMATION (CONTINUED)

HOW TO BOOK
In order to benefit from the special Congress rates, please use one of the following booking methods:
- Send the enclosed Registration & Accommodation form with the required deposit via fax or mail, at the earliest opportunity
- Book your hotel accommodation through the Congress website online at www.kenes.com/asiancogi

PAYMENT
Payment for accommodation, provided by Kenes International is payable (less deposit) before your arrival in Bangkok.

Kenes International accepts Travelers cheques, Euro cheques, Visa, Master Card, and Diners Club credit cards.
Please note, 2 weeks prior to arrival in Bangkok, your credit card will be automatically charged for the balance of your hotel accommodation. Participants who paid with a bank transfer or cheque, need to send this balance to Kenes International. Full prepayment is required for all hotel accommodation.

CANCELLATION OF ACCOMMODATION

| Rooms cancelled prior to August 1, 2004 | 1 night cancellation fee will be charged. |
| Rooms cancelled from August 2, 2004 | 80% cancellation fees will be charged. |
| Rooms cancelled on or after October 2, 2004 | full cancellation fees will be charged. |

Cancellations must be sent to Kenes International in writing (either via fax or email).

In the event of non-arrival, the hotel will automatically release the reservation and the payment will be non-refundable.

IMPORTANT NOTES
Kenes International and their agents shall not be responsible for and shall be exempt from all liability in respect of any loss, damage, injury, accident, delay or inconvenience to any person, or his/her luggage or any other property for any reason whatsoever, for any tourist services provided. Personal travel and health insurance is recommended.

Official check-in time for the hotel is 14.00 hours and check out is 12.00 hours.
REGISTRATION AND ACCOMMODATION FORM

Please PRINT in BLOCK LETTERS and FAX, Email or AIRMAIL to:

KENES International
CARES FOR YOUR ORGANIZATION

Registration and Accommodation Dept.
17 Rue du Cendrier
Ch-1211 Geneva 1
Tel: +41 22 908 0488 Fax: +41 22 732 2850 E-mail: apcogi_reg@kenes.com

IDENTIFICATION

Please complete this section accurately. The information you provide will allow us to correspond with you efficiently.

Participant (Please TYPE or PRINT IN BLOCK LETTERS)

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REGISTRATION AND ACCOMMODATION FORM  
(continued)

Last Name

ACCOMMODATION:

☐ Shangri-La Hotel

Type of room required  ☐ Single  ☐ Double*  ☐ Other

Check In Check out Total night/s

* I will share my accommodation with:

PAYMENT

Please indicate the amount enclosed and preferred mode of payment. Ensure that you send your fully completed registration and accommodation form together with your payment:

Registration Fees $:

Deposit for Hotel Accommodation $:  (deposit of $100 per room)

Option 1: Credit Card.

☐ Visa ☐ MasterCard ☐ Diners

Number Expiry Date (month/year)

Name as shown on card:

Option 2: Bank Transfer - with your name and address indicated on the reverse. If payment is made for more than one person or by a company please make sure all names are indicated and send fully completed registration and accommodation forms together with a copy of the bank transfer. Please make drafts payable to: Asian Pacific Cogi 2004, Credit Suisse Bank Geneva branch, Switzerland, Account Number 693980-52-33, Swift code: CRESCHZZ 12A IBAN CH38 0425 1069 3980 5203 3. Bank charges are the responsibility of the payee and should be paid at source in addition to the registration and accommodation fees.

Option 3: Cheque made payable to: "ASIAN PACIFIC COGI"

Enclosed cheque number:  Bank :

Date ___________________________ Signature ____________________________________________

By signing this form you authorize KENES INTERNATIONAL to charge the above credit card for the balance of your account two weeks prior to your arrival for services ordered.
CALL FOR ABSTRACTS

**Deadline for the submission of abstracts:** Wednesday, September 8, 2004.

Abstracts should only be submitted via the Congress website: www.kenes.com/asiancogi. For further instructions on submission, please see the website.

If you do not have access to the Internet you may send your abstract to the Secretariat at the address on page 15. All abstracts will be presented as posters.

Please contact the Secretariat if you have not received any communication regarding your abstract by September 22, 2004.

If you intend to mail your abstract please use the following guidelines:
- Add the name and contact details including e-mail, fax and telephone number of the presenting author.
- Select a category from gynecology, infertility or perinatology
- Include full affiliations for authors including department, institution, city and country
- Ensure that abstract text does not exceed 250 words

A limited number of abstracts will be scheduled for oral presentation as part of the general program under the Free Communications Section. To qualify for one of these presentations, please submit a short abstract for preliminary evaluation as soon as possible to the Secretariat by e-mail to stating in the e-mail subject title: Asian Pacific Congress: Abstract for Free Communications.

Please submit your e-mail abstract by July 15, 2004.
Yasmin®

Reliable contraception with stable body weight

relief of premenstrual symptoms and menstrual pain

beautiful skin

A package of benefits for her well-being

Yasmin® Prescribing Information

Indications: Yasmin® contains drospirenone and ethinyl estradiol. Yasmin® is indicated for contraceptive use in women who have completed childbearing. Yasmin® is also indicated for the treatment of moderate acne vulgaris in women of reproductive age. Yasmin® is not indicated for use in men.

Warnings: Yasmin® contains drospirenone, a progestin that may cause an increased risk of thromboembolic events. The use of Yasmin® may increase the risk of venous thromboembolic events, including DVT and PE. The risk of thromboembolic events is increased in women with a personal or family history of thromboembolic disease or risk factors for VTE, including obesity, hypertension, diabetes, and smoking.

Precautions: Yasmin® should be used with caution in women with a history of unexplained vaginal bleeding. Women with a history of cholelithiasis, cholecystectomy, or carcinoma of the breast should be closely monitored.

Contraindications: Yasmin® is contraindicated in women with a history of thromboembolic disease, including unexplained death, or who have had cerebrovascular or thrombotic events.

Other Instructions: Yasmin® should be used with caution in women who have a history of liver disease.

Before starting Yasmin®, patients should consult their healthcare provider and review the Patient Information leaflet provided by the manufacturer.

A package of benefits for her well-being

Yasmin® is a combination of a progestin (drospirenone) and an estrogen (ethinyl estradiol). It is indicated for use in women who are seeking reliable contraception or relief from acne or premenstrual symptoms.

Benefits:

- Reliable contraception: Yasmin® provides effective contraceptive protection for up to 21 days, allowing for easy use and integration into daily life.
- Stable body weight: Studies have shown that Yasmin® may help to maintain a stable body weight, which can be beneficial for overall health.
- Relief from premenstrual symptoms: Yasmin® can alleviate symptoms such as bloating, mood swings, and cramping, improving the quality of life for many women.
- Beautiful skin: The combination of drospirenone and ethinyl estradiol in Yasmin® can help to improve skin texture and reduce breakouts, leading to a more glowing complexion.

Yasmin® is available in a convenient blister pack with sub-multiples, allowing for easy administration on a daily basis. It is recommended to consult with a healthcare provider for the best choice of contraceptive method and dosage.