THAWED SINGLE BLASTOCYST TRANSFER BECOMES AN AXIOM

I. Zorina, S. Yakovenko, V. Apyshko
IVF Clinic, Altravita, Russia

Objective
To compare the pregnancy rate between cycles of transfer one thawed blastocyst in the natural ovulatory cycle or in a cycle with hormone replacement therapy with pregnancy rate in other IVF programs.

Design
Prospective study involving 4473 patients up to 35 years, who underwent embryo transfer in an IVF cycle in the period from January 2011 to December 2013. Randomization was made on the basis of the preferences of the couple on the number and day of transferred embryos, and mild or severe ovarian hyperstimulation syndrome, which was a contraindication for embryo transfer in stimulated IVF cycle.

Patients
Study group - Thawed single blastocysts transfer (TSBT) - 1416 patients
Control groups -
1. Thawed double blastocysts transfer (TDBT) - 742 patients
2. Fresh single blastocyst transfer (FSBT) - 895 patients
3. Fresh double cleavage stage transfer (FDCST) - 1420 patients

Main Outcome Measure(s)
The ongoing pregnancy more than 8 weeks (PR), multiple gestation rate (MGR), ovarisn hyperstimulation rate (OHR)

Results
There was no difference in PR between study group and TDBT control group - 47,3% vs 48,6% (OD 0,89), but multiple gestation rate in TDBT was 38,8% vs 2% in TSBT. There was a little difference in PR between study group and FSBT - 47,3% vs 41,3% (OD 1,2), but OHR in FSBT group was 8,2%. PR in FDCST group was 26,8%, (OD 2,3), so the the probability of pregnancy in study group was much higher.

Conclusion
Transfer one thawed blastocyst is a highly effective method of achieving pregnancy for women of young reproductive age with low risk of multiple gestation rate, the absence of hyperstimulation syndrom during pregnancy and the lowest medical therapy.