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Comparison of follitropin alfa and urinary gonadotropins in IVF cycles.

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Abstract

AIM: The aim of this study was to compare human menopausal gonadotropins with recombinant follicle stimulating hormone-follitropin alpha following a long down-regulation protocol in intra cytoplasmic sperm injection cycles in our clinic, and to review the outcomes in the light of preceding studies.

METHODS: This was a retrospective study. Among a total number of 2798 patients who had undergone IVF/ICSI applications, 579 eligible patients were included, and their data were evaluated retrospectively. Three hundred eighteen patients were treated with follitropin alpha and 255 patients were treated with hMG. Total units of follitropin alpha preparations used in ovulation induction, total number of meiois-2 phase oocytes, total number of used oocytes in ICSI cycle, fertilization rate and clinical pregnancy rates of both groups were analyzed.

RESULTS: Mean duration of stimulation was longer in the group of patients treated with rFSH-α compared to the second group of patients treated with hMG (8.88 days and 8.55 days, respectively; P<0.05). The number of transferred embryos were 3.08 and 2.68 for patients treated with follitropin alpha and hMG, respectively (P<0.05). Clinical pregnancy rates were % 28 and %33 in the groups of patients treated with follitropin alpha and hMG, respectively. Even though a greater clinical pregnancy rate was noted in the hMG group, there was no statistically significant difference between the two groups (P>0.05).

CONCLUSION: Our results indicate that there is no statistically significant difference between follitropin alpha and human menopausal gonadotropin in terms of the clinical pregnancy rates.

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