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Unexplained Infertility A Shorter Route to IVF is More Efficient

For couples with Unexplained Infertility, traditional recommendations were to undergo 3 treatment cycles of Clomiphene with Intrauterine Insemination (CC/IUI), then 3 treatment cycles with injectable medications (FSH/IUI) before attempting In Vitro Fertilization (IVF). This recommendation was based upon historically low success with IVF when it was first invented.

In the recently completed FASST study funded by the National Institutes of Health, researchers at Dartmouth-Boston IVF have shown that in couples where the female partner is under 40 years of age and the couple is diagnosed with unexplained infertility (no pelvic pathology, normal ovarian reserve and a normal semen analysis), there appears to be little to no benefit in treating with FSH/IUI.

The FASST study included 503 couples who were randomly assigned to conventional treatment (3 cycles CC/IUI, 3 cycles FSH/IUI and then IVF) or the accelerated or "Fast Track" protocol (3 cycles CC/IUI, then IVF).

The study found:

- 1. That both groups had similar success rates with 75% of couples undergoing conventional therapy achieving pregnancy as compared to 78% of couples assigned to the accelerated protocol.
- 2. Pregnancy rates per cycle were;
 - a. 7.5% with CC/IUI
 - b. 9.8% with FSH/IUI
 - c. 31% with IVF
- 3. Those couples in the accelerated protocol had a shorter time to successful pregnancy (40% better chance of being pregnant in the first year of treatment), and underwent fewer treatment cycles.
- 4. Those couples in the accelerated protocol saved approximately \$10,000 per delivery.
- 5. Additionally, IVF may offer a reduced multiple pregnancy rates as compared to FSH/IUI therapy by limiting the number of embryos transferred to the woman.

In summary, by eliminating the FSH/IUI part of treatment for Unexplained Infertility and going straight to IVF

- 1. Faster time to pregnancy and delivery
- 2. Fewer Treatment cycles
- 3. Less cost

