









Polycystic Ovary Syndrome:

medical management of infertility

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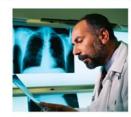




















### Conflict of Interest

External Industry Relationships *	Company Name	Role
Equity, stock, or options in biomedical industry companies or publishers	None	
Board of Directors or officer	None	
Royalties from Emory or from external entity	None	
Industry funds to Emory for my research	None	
Other	None	

# What is infertility?

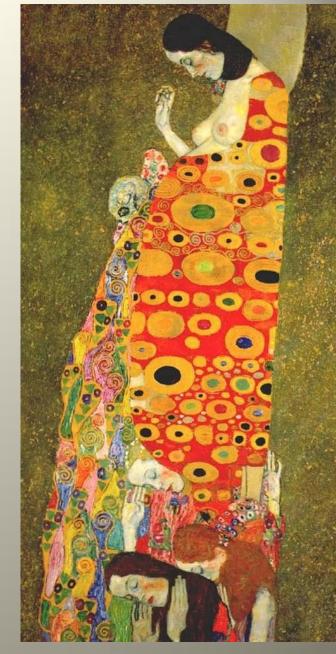


Edward Hopper, Morning Sun, 1952

- Normal conception rate per month in young women
  - 1st 20%, 3rd 50%, 6th 75%, 12th 90%
- Infertility is typically defined as one year of unprotected intercourse without conception (6 months if over 35)
- Occurs in 1 in 12 couples or 24 million women
- Women with PCOS often do not ovulate regularly

# Complications in pregnancy that *may* be higher in women with PCOS

- Risk of miscarriage
- High blood pressure and preeclampsia
- Gestational diabetes
- Preterm delivery
- Cesarean delivery

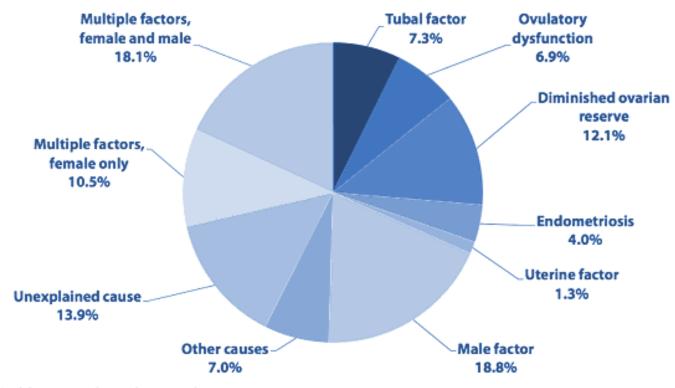


# Recommended Testing

- Record menstrual pattern and check for ovulation
- Screen for metabolic problems that contribute to infertility and complications in pregnancy
  - diabetes/pre-diabetes, obesity, high blood pressure, thyroid disease
- Check the sperm
- Check the uterus and Fallopian tubes

#### Don't assume there are no other issues





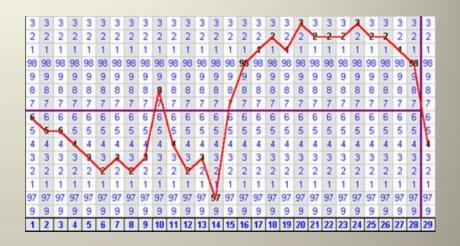
\* Total does not equal 100% due to rounding.

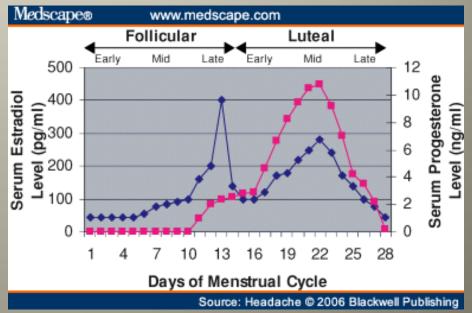
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# **Detecting Ovulation**

- Basal body temperature charting
- Urine ovulation predictor kits
- Progesterone level> 3ng/ml







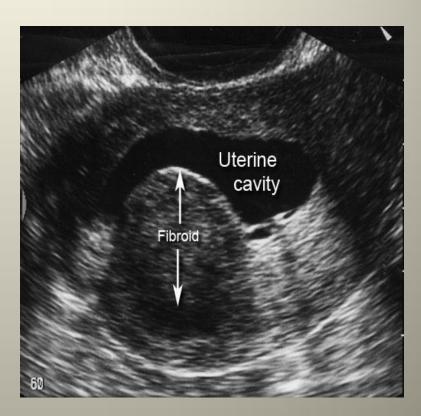
# Semen Analysis

- Performed after 2-7 days of abstinence
- Avoid use of lubricants
- Collect at a fertility center or at home (bring in within one hour of collection)
- Abnormal tests should be repeated

# Checking the Fallopian tubes and uterus



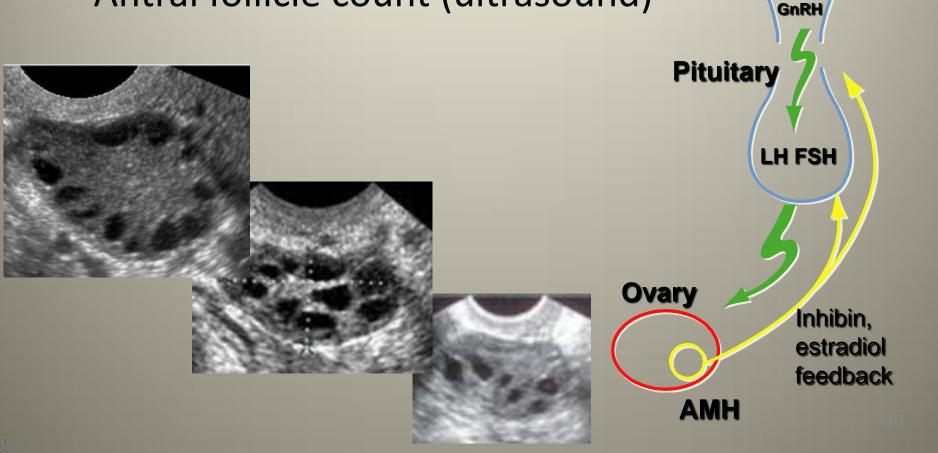
Hysterosalpingogram (HSG)



Sonohysterogram (SHG)

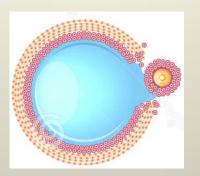
# **Ovarian Reserve Testing**

- Day 3 FSH, estradiol (E<sub>2</sub>)
- Antimullerian hormone (AMH)
- Antral follicle count (ultrasound)

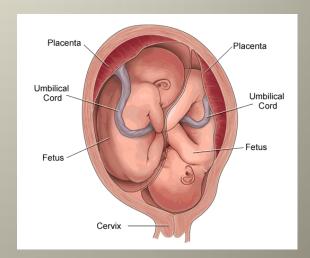


# Goals of fertility treatment

- Restore ovulation
  - lifestyle changes
  - medications



Minimize risk of multiple gestation



Consider cost effectiveness



# metformin (Glucophage)

- Who needs this?
  - Some doctors feel all women with PCOS benefit
  - Others treat only if pre-diabetic
- Benefits
  - May be more likely to ovulate
  - May lower miscarriage risk
  - May improve egg/embryo quality
- Risks
  - Gastrointestinal side effects common

### **Ovulation** medications

### 2/3 of women respond to oral medications

- clomiphene citrate (Clomid), FDA approved
- letrozole (Femara), off label
- Risk of twins approximately 5-8%

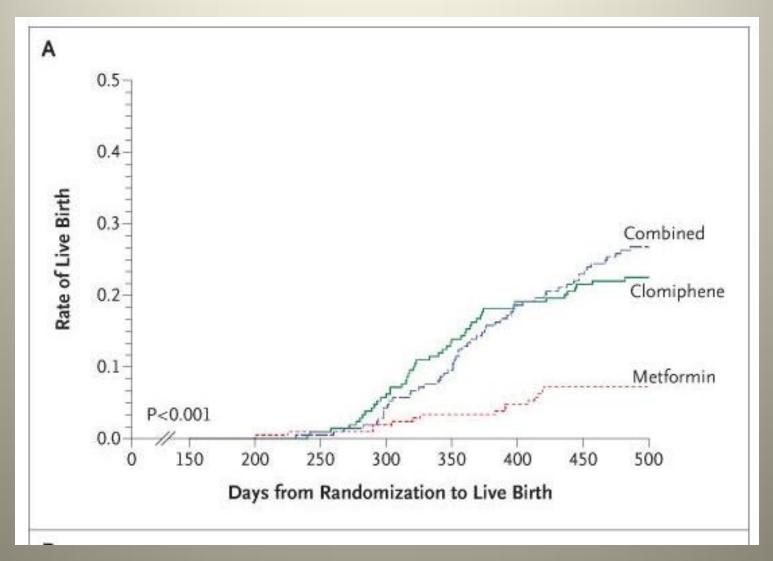


### Gonadotropin injections: use lowest effective dose

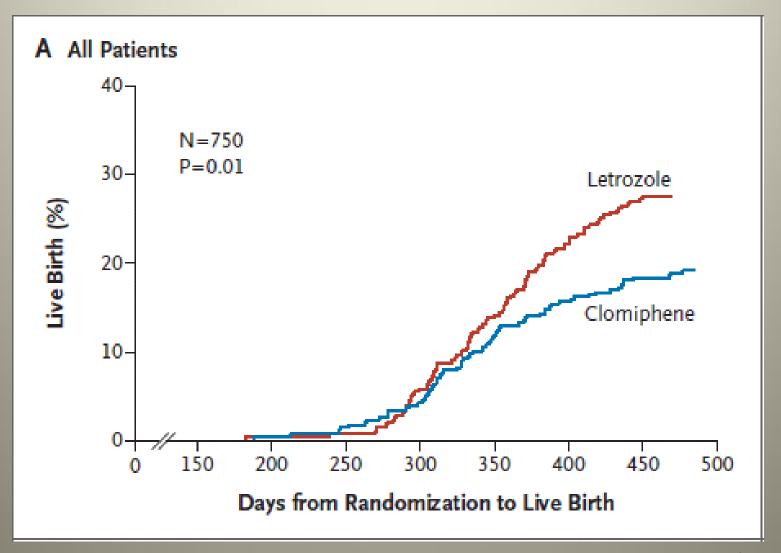
- More frequent monitoring with ultrasounds and blood tests
- Higher risk of multiple gestation



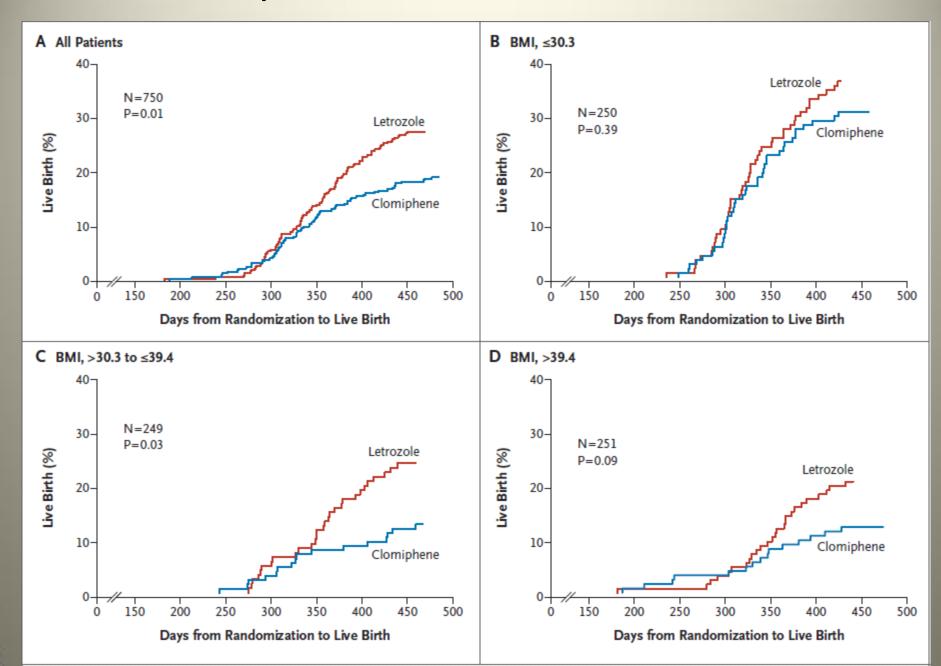
# clomiphene, metformin or both?



# letrozole vs clomiphene in PCOS

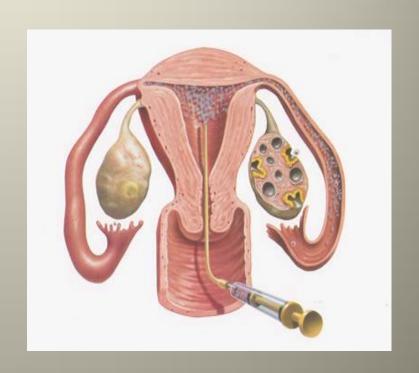


#### Letrozole may be more effective in obese women



# Intra-uterine insemination (IUI) may increase the chance of pregnancy

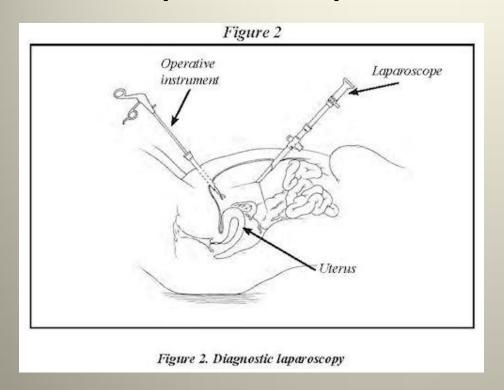
- Semen is washed and concentrated motile sperm are placed directly into the uterus near the time of ovulation
- For most women, feels like a pap smear
- Chance of pregnancy is approximately 10-18% per IUI



# When to consider other options

- Not responding or over responding
- 3-6 cycles are reasonable in anovulatory women
- >6 cycles have very low chances of success
- >12 may be associated with a higher risk for ovarian cancer

### Laparoscopic ovarian drilling





asrm.org

- Can help restore ovulation temporarily, typically not as effective as clomiphene and metformin
- Lowest risk for multiples
- Caution: may cause diminished ovarian reserve

### Laparoscopic drilling vs Clomid/metformin

	LOD		other treatment			Odds Ratio	Odds Ratio	
Study or Subgroup	Events	Total	Events	Total	Weight	M-H, Fixed, 95% CI	M-H, Fixed, 95% CI	
1.1.1 LOD versus Clomiphene citrate + metformin								
Palomba 2004	20	55	37	54	19.2%	0.26 [0.12, 0.58]		
Palomba 2010	13	25	12	25	4.7%	1.17 [0.39, 3.56]		
Subtotal (95% CI)		80		79	23.9%	0.44 [0.24, 0.82]	•	
Total events	33		49					
Heterogeneity: $Ch^2 = 4.62$ , $df = 1$ (P = 0.03); $I^2 = 78\%$ Test for overall effect: $Z = 2.56$ (P = 0.01)				:%		Clomid/N	Metformin Ovarian Drillin	
Test for overall effect:	Z = 2.56 (	P = 0.0	11)			1011101		

Risk of multiple gestation

mak of marcipie gestation								
	Ovarian di	illing	Other trea	tment		Odds Ratio	Odds Ratio	
Study or Subgroup	Events	Total	Events	Total	Weight	MLH, Fixed, 95% CI	M-H, Fixed, 95% Cl	
1.2.1 LOD versus Clo	1.2.1 LOD versus Clomiphene citrate + metformin							
Abu Hashim 2011	0	144	4	138	22.3%	0.10 [0.01, 1.94]		
Palomba 2004	0	55	0	5.4		Not estimable		
Palomba 2010	0	25	0	25		Not estimable	_	
Subtotal (95% CI)		224		217	22.3%	0.10 [0.01, 1.94]		
Total events	0		4					
Heterogeneity. Not ap	Heterogeneity. Not applicable							
Test for overall effect	Z = 1.52 (P)	= 0.13)					Drilling Meds	
1.2.2 LOD versus Gor	1.2.2 LOD versus Gonadotrophin							
Bayram 2004	1	56	9	57	42.7%	0.10 [0.01, 0.79]		
Farquhar 2002	0	5	0	5		Not estimable		
Kaya 2005	0	6	2	6	11.3%	0.14 [0.01, 3.63]		
Lazoviz 1998	0	14	2	9	14.1%	0.10 [0.00, 2.44]		
Vegetti 1998	0	3	1	5	5.1%	0.43 [0.01, 14.08]		
Subtotal (95% CI)		84		82	73.3%	0.13 [0.03, 0.52]	-	

### When to consider IVF

- Young women who do not respond to oral medications
- Ovulation induction hasn't worked
- Age is a concern
- Other factors are at play (tubes, sperm)
- Preimplantation genetic screening is desired

### In vitro fertilization (IVF)

- Daily injections (FSH) for two weeks to stimulate the ovaries to produce eggs (10-20)
- Frequent monitoring with ultrasound and estrogen levels
- Egg retrieval under sedation

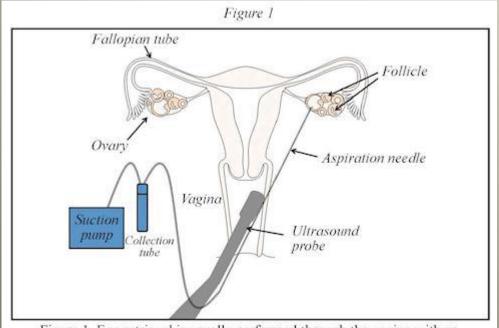
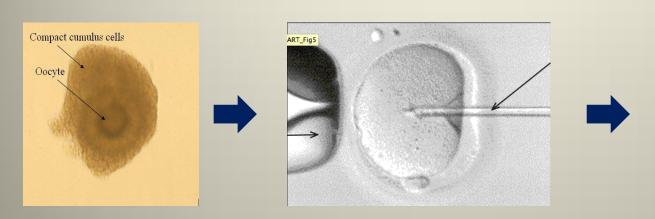


Figure 1. Egg retrieval is usually performed through the vagina with an ultrasound-guided needle.

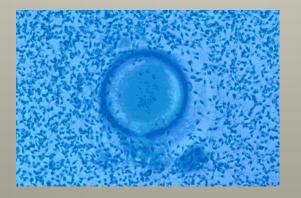


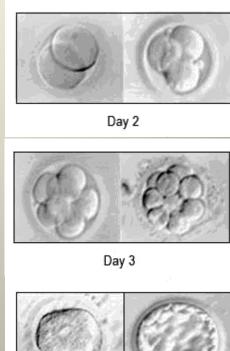
# IVF lab procedures



Eggs isolated

ICSI vs conventional insemination





Embryo culture

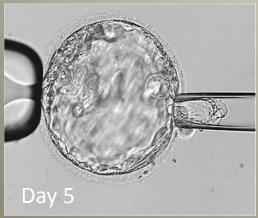
Day 4

Day 5

### Preimplantation Genetic Diagnosis/Screening

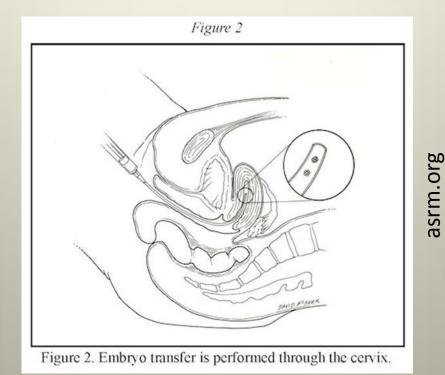
#### **Embryo**





- Screen for genetic diseases before pregnancy
- Screen for chromosomal abnormalities that may lead to implantation failure and miscarriage

# Embryo transfer

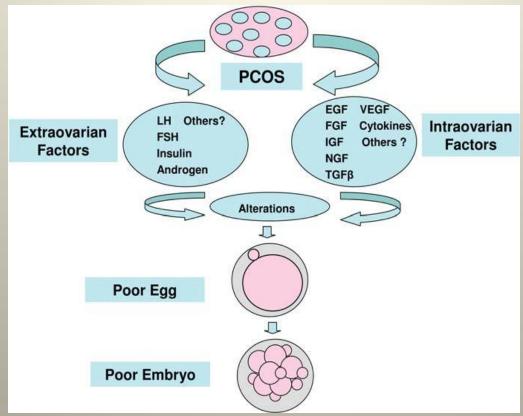


- 3-5 days after egg retrieval
- Can also be done with frozen embryos
- No anesthesia, feels like a long pap smear

### Risks of IVF with PCOS

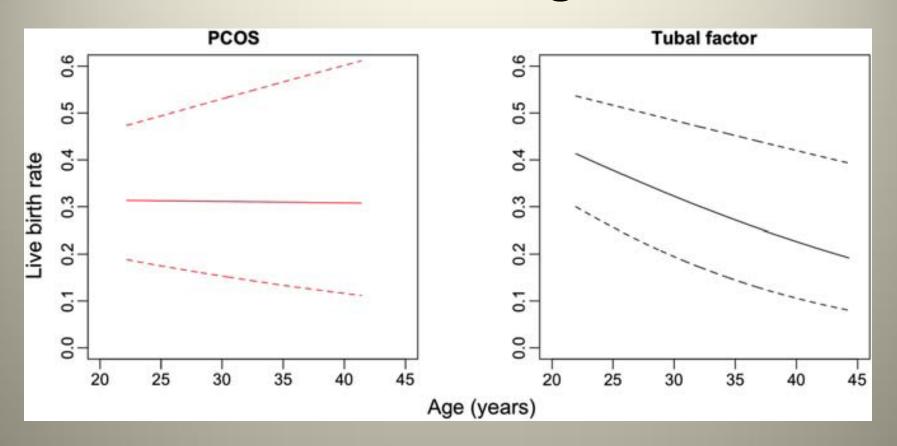
- Multiple gestation if more than one embryo is transferred
- Ovarian hyperstimulation syndrome (OHSS)
- Injury during egg retrieval if ovaries are difficult to access
- Its expensive!

### Egg and embryo quality in PCOS



- May have poorer quality embryos and higher rate of miscarriages secondary to high LH, insulin and androgens
- Alterations in growth factors that help follicles grow may alter egg quality

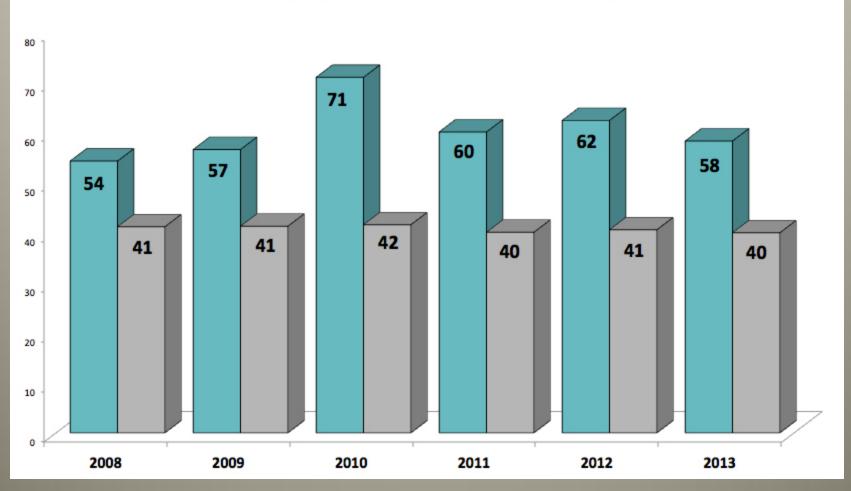
# IVF and PCOS: the good news

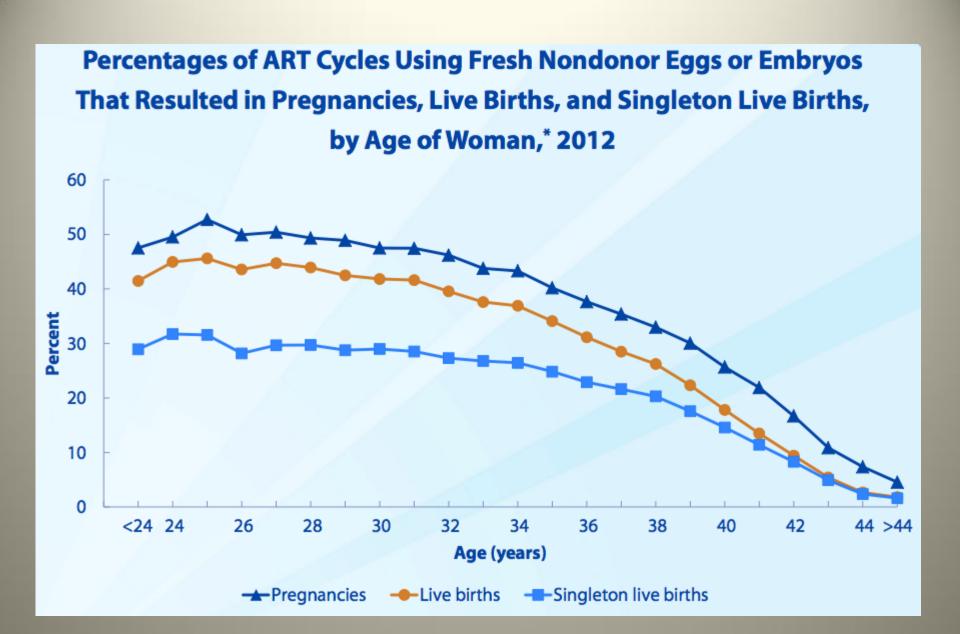


Predicted age-specific live birth rates for women with PCOS or tubal factor infertility undergoing first treatment with IVF..

### IVF Success Rates, Women < 35 Years Old % of Cycles Resulting in Live Birth

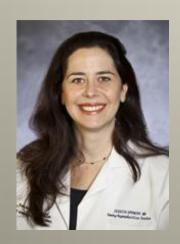








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# Thank you!