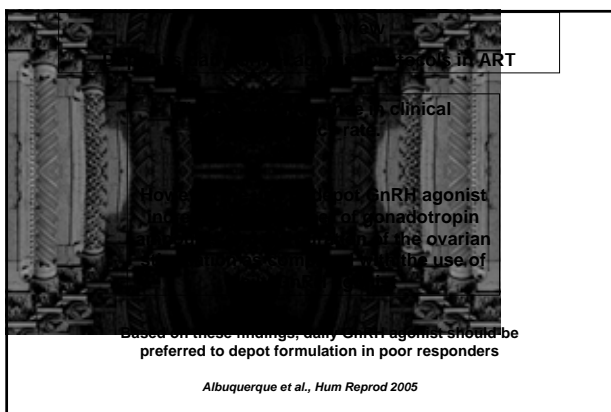
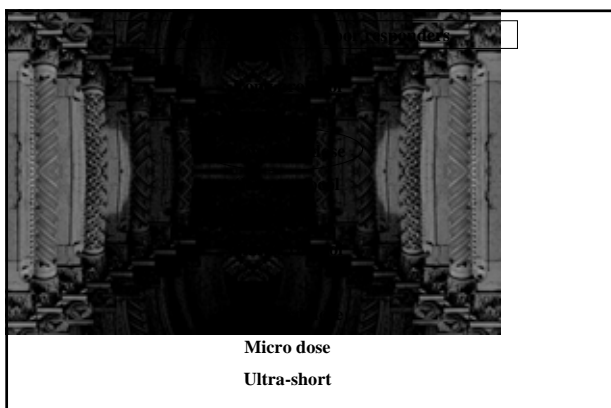
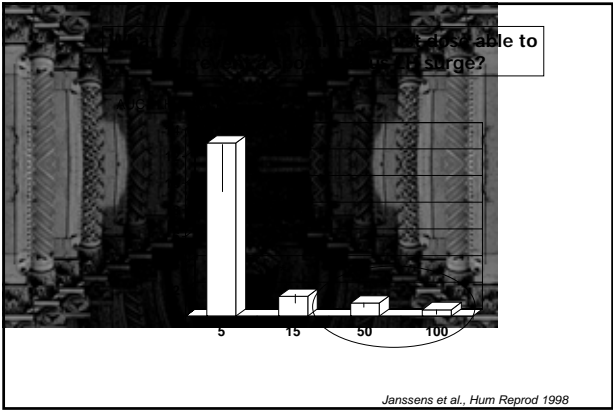
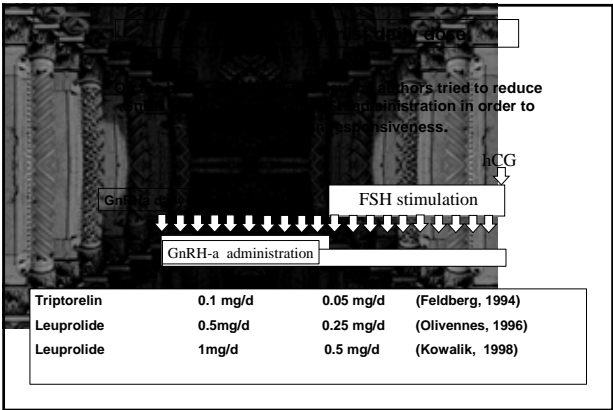
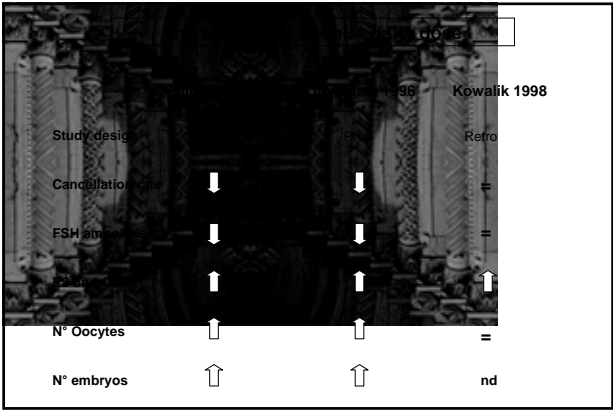
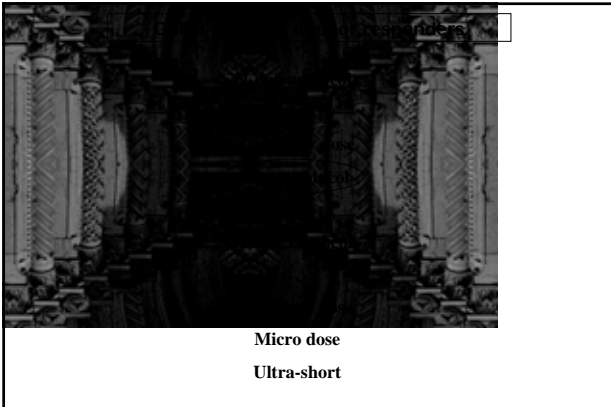
[illegible]

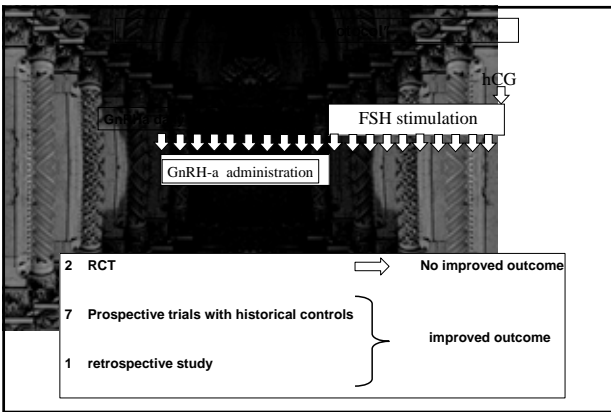




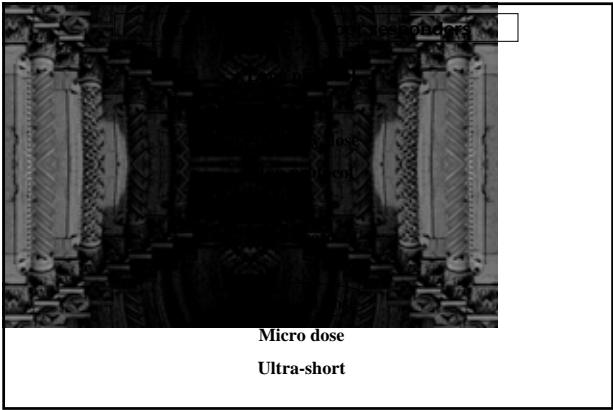


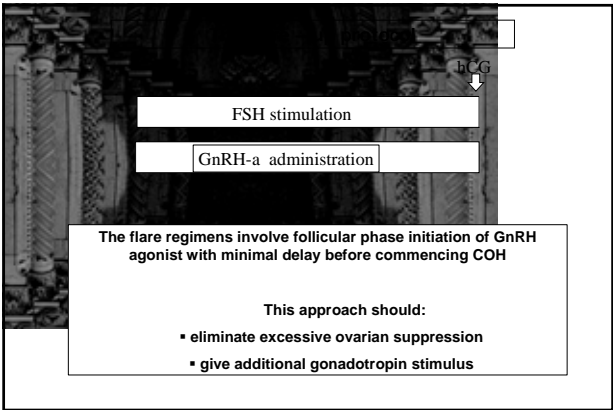






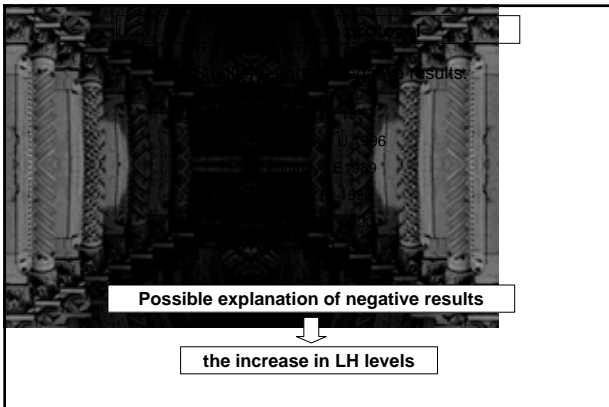
		Garcia Velasco (2000)
Design	stop vs non stop	RCT (stop vs non stop)
No. Cycles	34	34 vs 36
Retrieved oocytes/no. of cycles	8.7	8.7 vs 6.2 ($p < 0.05$)
Cancellation rate	20.5%	2.8 vs 5.9 (NS)
No. clinical pregnancies	14.3%	14.3 vs 18.7 % (NS)
Outcome	no. of oocytes	no. of oocytes

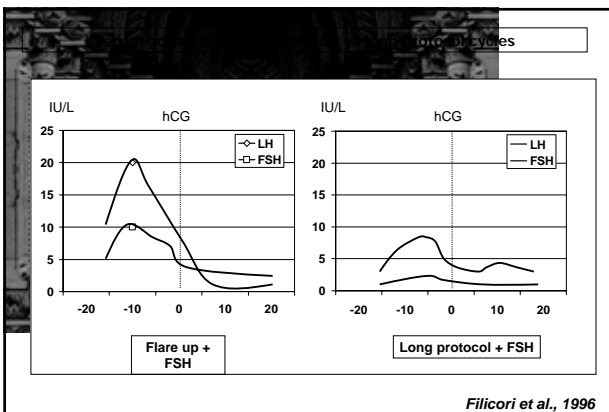


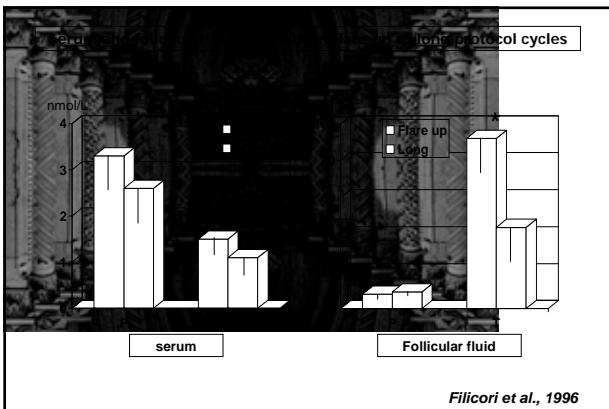


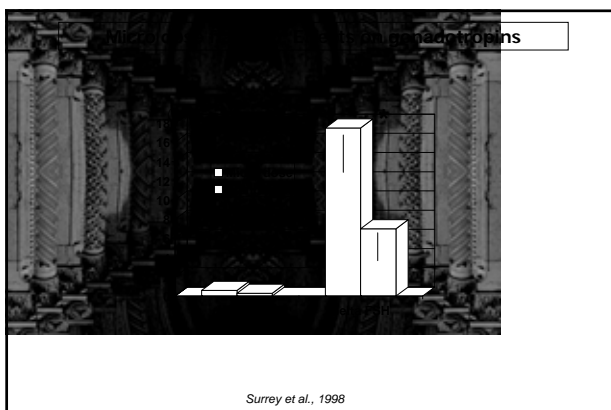
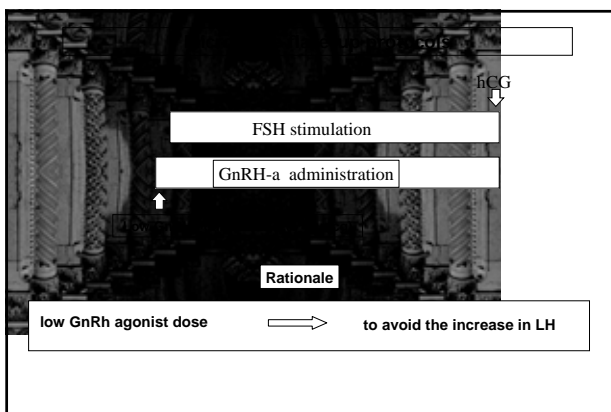
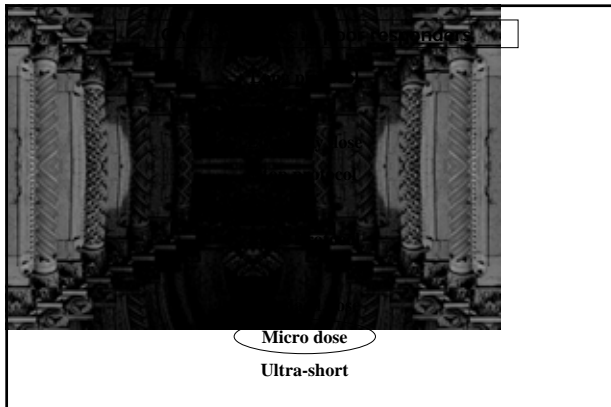
→ Absence of GnRH-a administration in poor responders vs standard regimens

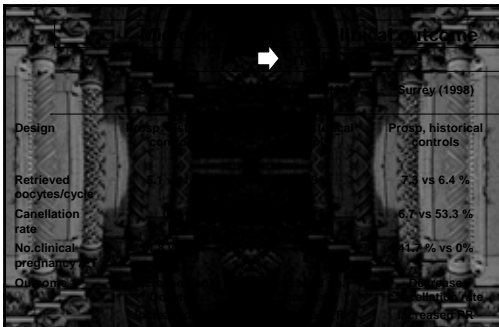
	Standard regimens	Torn (1996)	Karande (1997)
Design	Retrospective	Retro	Prosp
Criteria for low response	FSH > 15 IU/L	FSH > 15 IU/L	FSH > 7
No. Cycles	65	65	80
Retrieved oocytes	10	10	10
Cancellation rate	23.8 %	23.8 %	23.8 %
No. clinical pregnancy / CL	29 %	20.4 vs 11.7 % (p<0.05)	13.4 %
Outcome	Increased cancellation rate	Increased pregnancy rate	Increase no. of oocytes













Retrospective	
Design	Prospective, historical controls
Retrieved oocytes/cycle	7.3 vs 6.4 %
Cancellation rate	6.7 vs 53.3 %
No. clinical pregnancies	11.7 % vs 0 %
Outcome	Increased cancellation rate

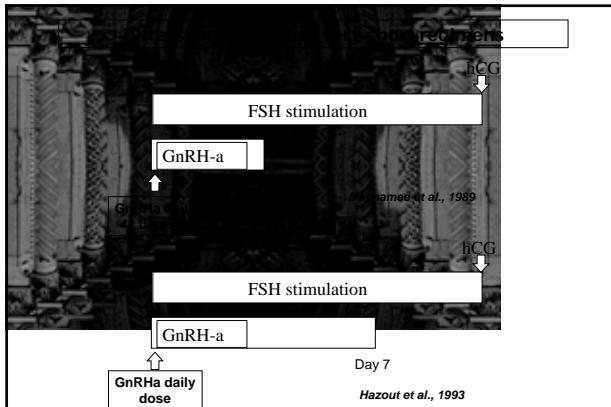


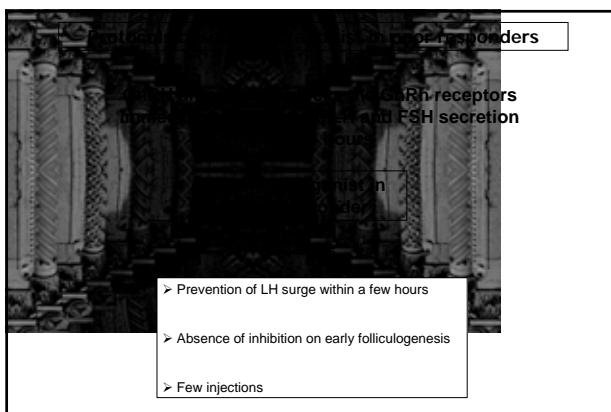
Regular dose	
n	15
No. oocyte retrieved	=
Mature oocytes	=
FR	=
No. pregnancies	=
No. clinical pregnancies	=
PR	=
Delivery rate	=

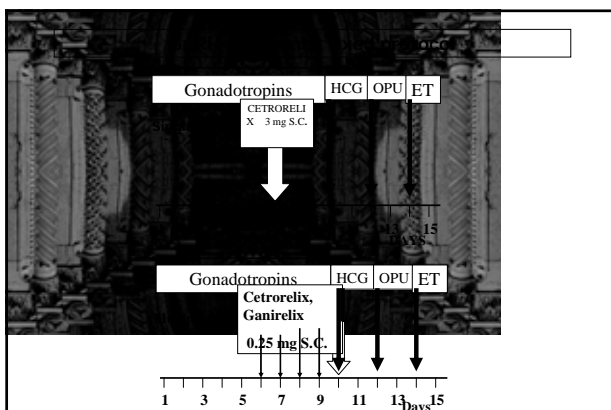


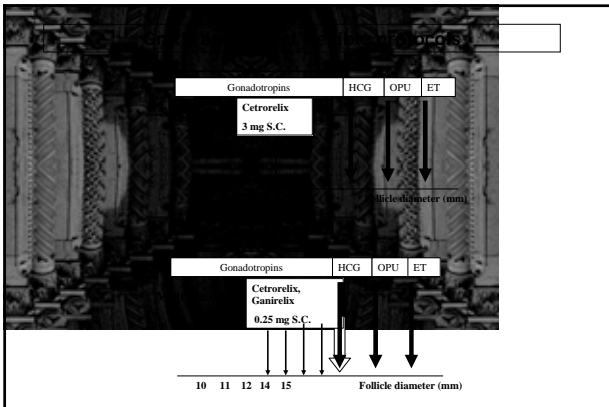
Micro dose

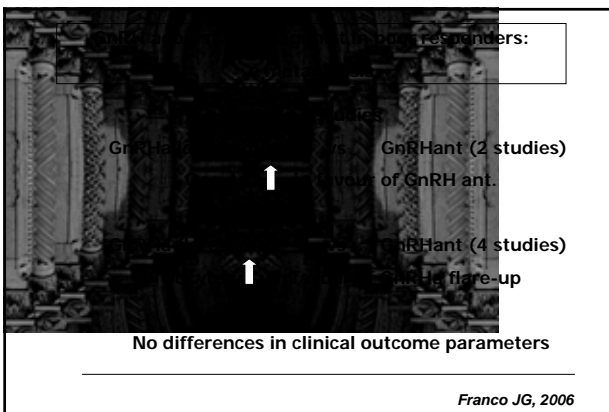
Ultra-short





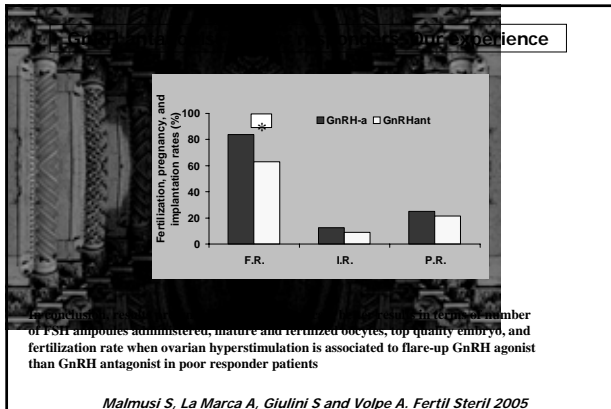


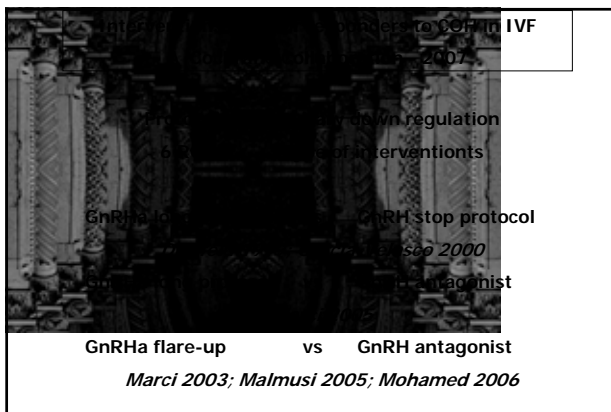


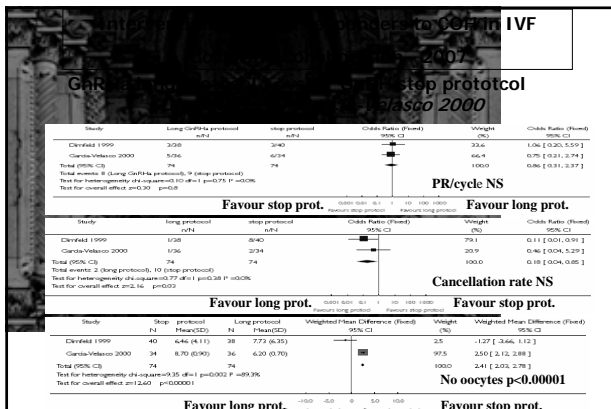


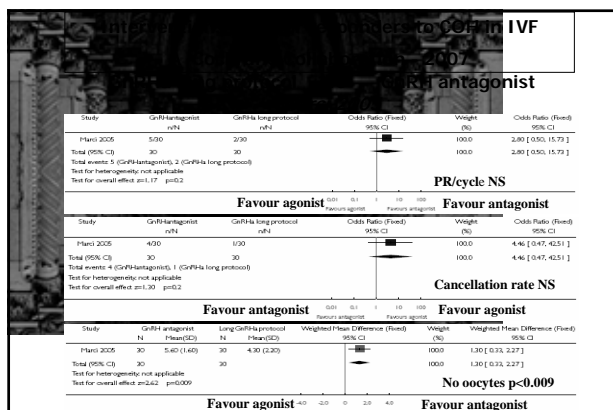
Our experience			
GnRH ant.			
GnRH antagonist			
No. of cases	25		
Canceled cycles	44	NS	
No. of cases	84±14	<.005	
Cost (€)	6900±1350	<.005	
Cost (€)	2.7±1.5	NS	
Cost (€)	2.5±1.2	<.05	
No of mm	3.2±1.3	1.7±1.2	<.005
No of top quality embryos	1±1	0.3±0.6	<.05

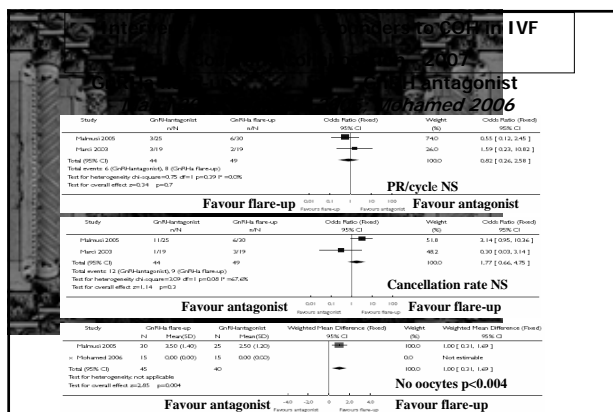
Malmusi S, La Marca A, Giulini S and Volpe A. Fertil Steril 2005













Low GnRHa daily dose	Standard flare-up	Micro dose flare-up	GnRH antagonist
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