# ESHRE 2021 Virtual (26 June-1 July 2021)

# Questions for the speakers

# Session 03: Molecular advances in Reproductive Endocrinology

**Predictive factors of autologous Oocyte Post-warming Survival rate - Debbie Montjean (France)**

**Q: What is the explanation for BMI to be a predictive factor, age and high E2 we understand?**

A: These factors were already shown to be related to oocyte quality, which affects the chance for an oocyte to survival vitrification/warming cycle.

**Q: The predictive effects have a wide confidence interval: will we really use the model with sufficient confidence clinically?**

A: The are interaction analysis ongoing. The results will provide definitive conclusions.

**Q: Was OPS evaluated in women with PCOS, taking into consideration the higher immature rate of oocytes recovered?**

A: Not to date. The immaturity rate was not a factor predicting OPS

**Q: You spoke about ops but about that what is the fertilization and blastulation rate in that oocytes?**

A: The fertilization and blastocyst formation rates were comparable to that of sibling fresh oocytes: 64,8% and 27,3%, respectively.

**Could ovarian reserve be affected after SARS-CoV-2 infection? - Maria Cruz Palomino (Spain)**

**Q: Is there an incentive to make longer follow up in this patient group?**

A: There is no incentive as such, only to confirm the results of the study in relation to the course of the Assisted Reproduction treatment and subsequent birth of the newborn

**Activated AKT/mTOR signalling in peripheral blood of women with premature ovarian insufficiency and its correlation with variable FMR1 expression profiles - Julia Rehnitz (Germany)**

**Q: So, does your data point towards POI being caused by Accelerated depletion OR a reduced Primary pool established?**

A: This is a crucial question in POI. In our study we compared POI vs controls. If accelerated depletion or reduced pool is causal is still unclear. However, we speculate, based on our results, that induced

mTor pathway leads to an induced activation of primordial follicles, GC proliferation and cell cylcle proliferation. In this sense it points to an accelerated depletion.

**Q: How does the TOR pathway would act in non FMR1 cases of POI?**

A: In our study no POI patients caused by FMR1-premutation have been analyzed; so results describe situation in non *FMR1*-premutated POI patients!

**Q: Predictive too in Pre POI cases? How can we measure this substances?**

A: We analyzed the same pathway members in normal versus poor responding patients in their granulosa cells and got comparable results (paper submitted for publication). So activation of this pathway seems to be active also prior to the development of POI.