AMH and ovarian function testing

Old and New Hormones: <u>Updates on new discoveries of hormones and</u> their receptors

Budapest, ESHRE Campus Course, 3-4 December 2009



Frank J Broekmans, associate professor Reproductive Medicine University Medical Center Utrecht

Take Homer

AMH is THE promise for Ovarian Reserve testing



Agenda

- AMH physiology
- AMH as test for Ovarian Reserve
- AMH as diagnostic tool in PCOS



Physiology

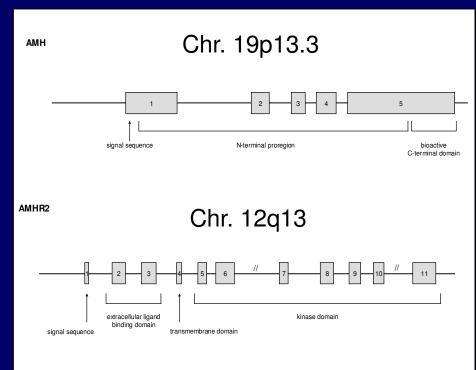
- What is AMH?
- Where is it produced?
- What does it do and how?
- Can we measure it?

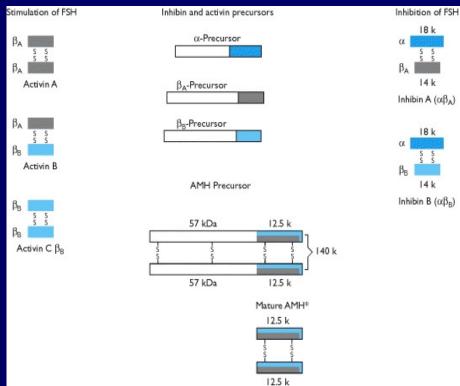


AMH - dimeric glycoprotein

member of the transforming growth factor β (TGF- β) family of growth and differentiation factors

Inhibins and Activins

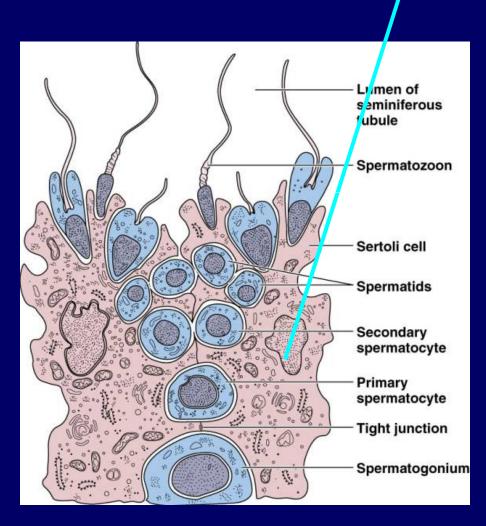


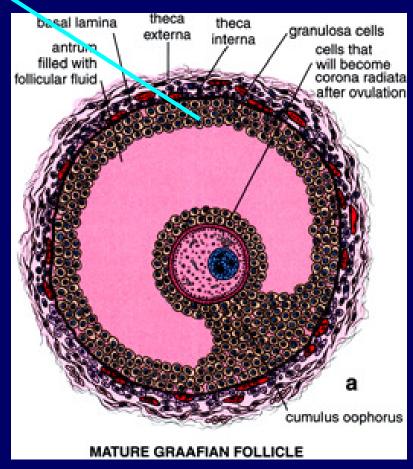




Where is it produced?

AMH





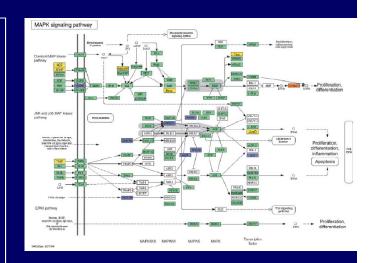


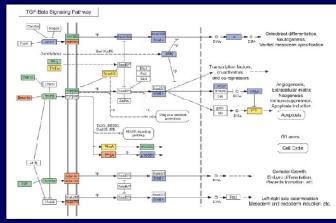
AMH effects through

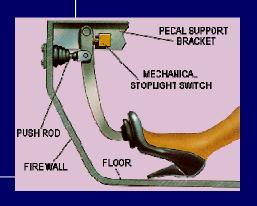
receptors expressed in the gonads and in mesenchymal cells adjacent to the mullerian ducts

decrease the expression of **stimulatory** factors

increase the expression of **inhibitory** factors









AMH – its role in gonadal differentiation

46 XY → SRY gene → Testis formation from primitive gonad

 \rightarrow AMH secretion from Sertoli cells \rightarrow Regression Mullerian ducts

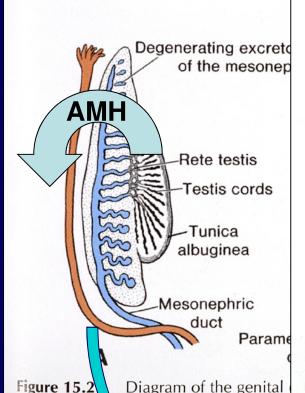


Figure 15.2 Diagram of the genital male (A) and female (B). The mesonep in both. Note the excretory tubules of the developing gord of in both sexes.

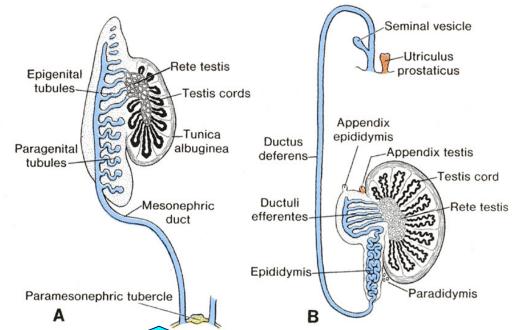
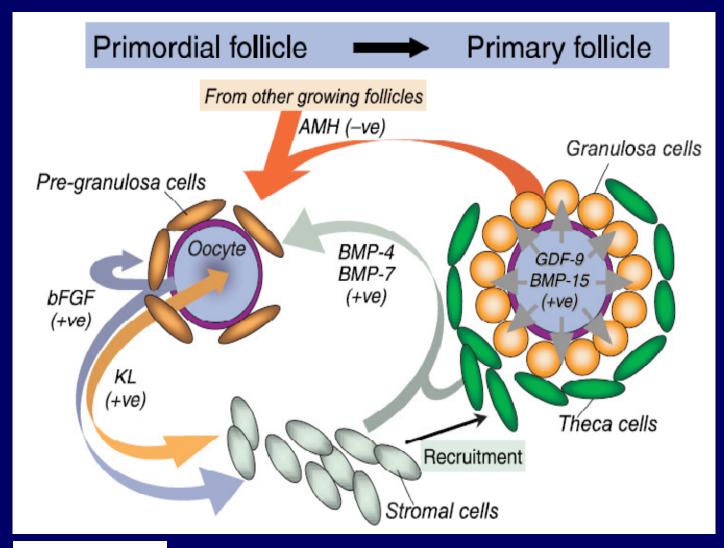


Figure 15.23.

e genital ducts in the male in the 4th month of development. Gramar a readour (paragenital tubule) segments of the mesonephric system regress. B. Diag m of the genital ducts after descent of the testis. Note the horseshoe-shaped testi cords, rete testis, and efferent ductules entering the ductus deferens. The parame prophric duct has degenerated except for the appendix testis. The prostatic utrick is an outpocketing from the urethra.



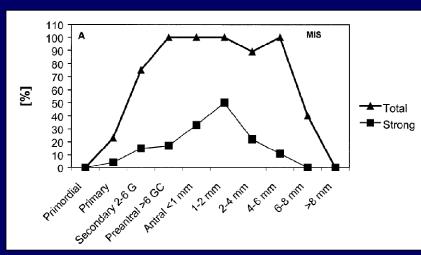
AMH affects follicle recruitment

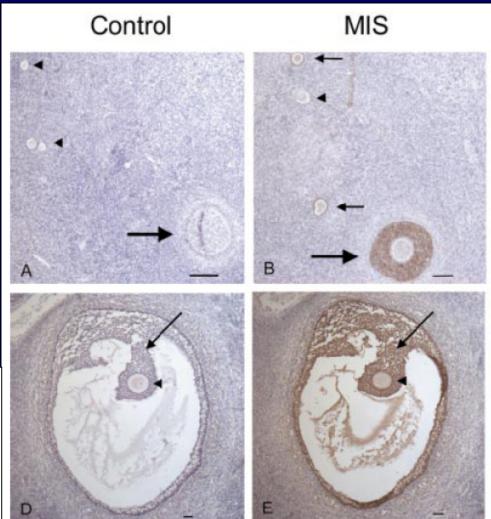




Ovarian AMH expression

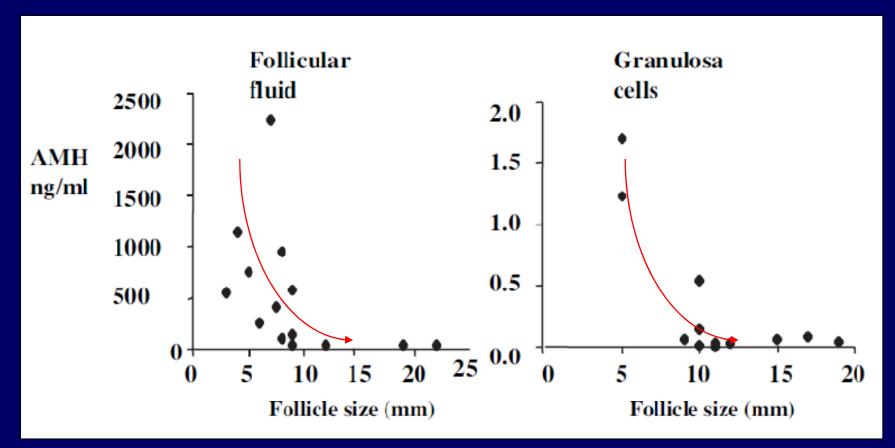
Granulosa cells of
Primary
Up to
Small antral follicles 6-8 mm







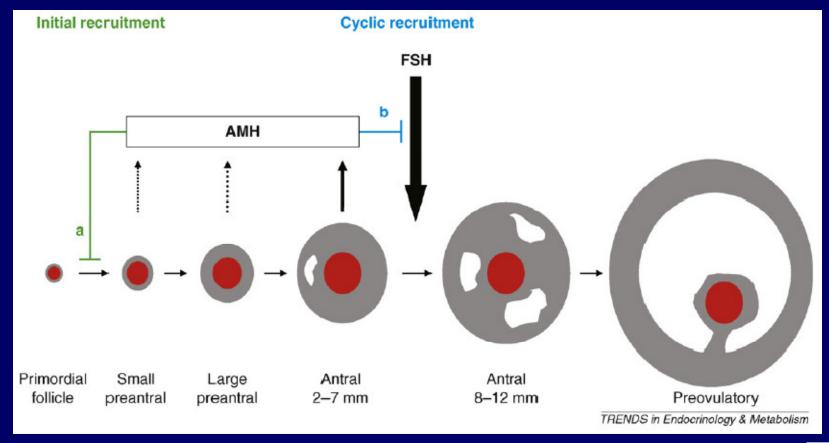
Levels of AMH in FF and from GC conditioned medium according to follicle diameter - Pellat, 2007 Larger follicles switch AMH off



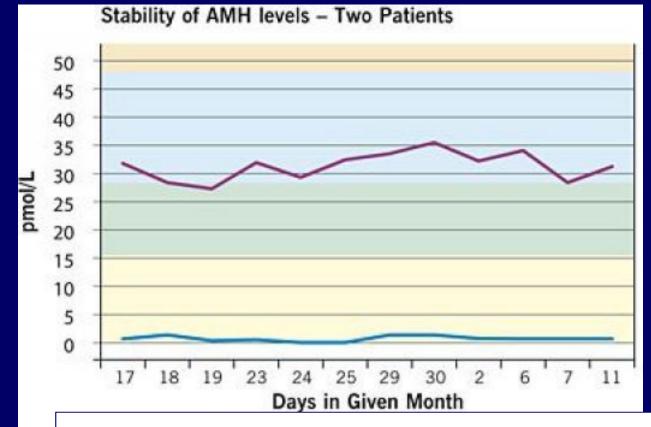


Summary - Ovarian AMH inhibits

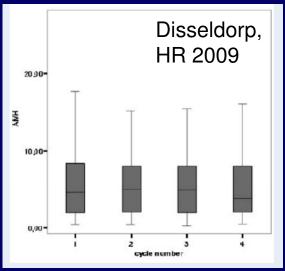
- 1. Initial recruitment of primordial follicles into primary follicles
- 2. Sensitivity of antral follicles to FSH in cyclic recuitment







Can we measure it??



0021-972X/06/\$15.00/0 Printed in U.S.A. The Journal of Clinical Endocrinology & Metabolism 91(10):4057-4063 Copyright © 2006 by The Endocrine Society doi: 10.1210/jc.2006-0331

Anti-Müllerian Hormone Levels in the Spontaneous Menstrual Cycle Do Not Show Substantial Fluctuation

Wouter J. K. Hehenkamp, Caspar W. N. Looman, Axel P. N. Themmen, Frank H. de Jong, E. R. te Velde, and Frank J. M. Broekmans



AMH is switched off when follicles grow into dominance

With FSH hyper stimulation:

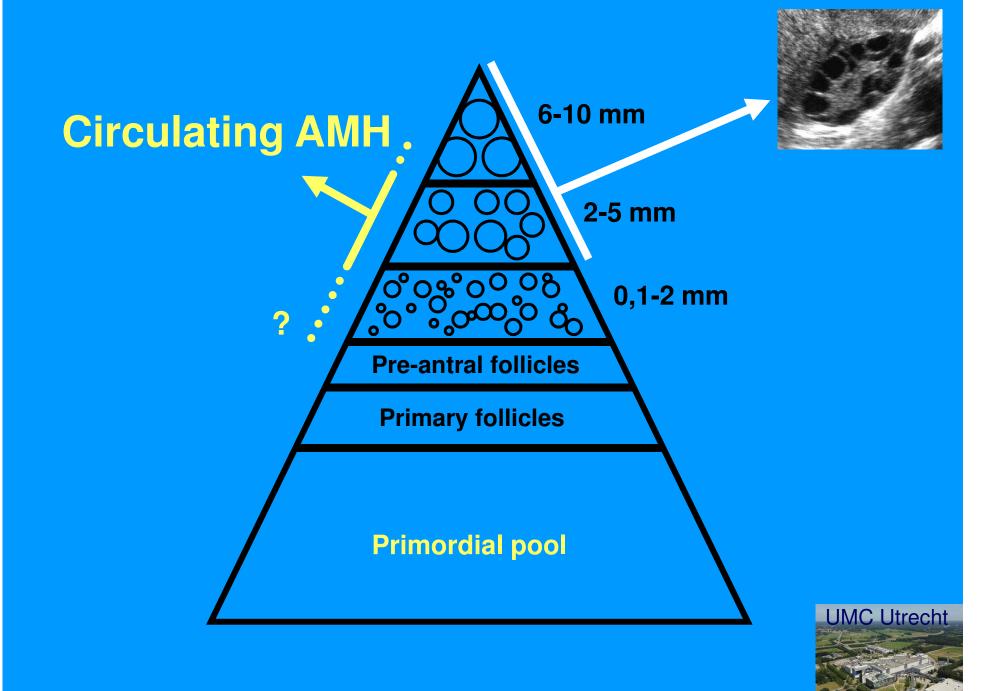
Follicles 2-12 mm are more than halved in number, parallel to a more than 50% reduction in serum AMH.

0.7 14 7 18 baseline d6 d8 dhCG

Wich follicles contribute to serum levels??

Fanchin, 2003





Agenda

- AMH physiology
- AMH as test for Ovarian Reserve
- AMH as diagnostic tool in PCOS



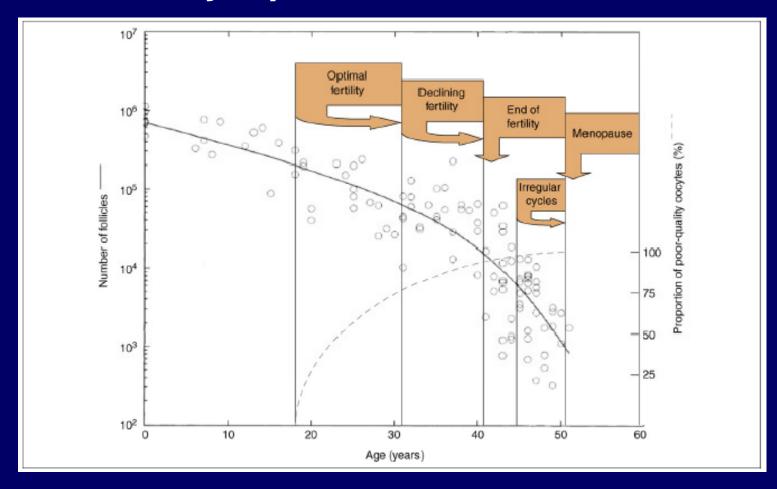
Testing Ovarian Reserve

- What is ovarian reserve?
- Is AMH a plausible marker for ovarian reserve??
- Has AMH proven to be a good marker for ovarian reserve
- And if so, what can we do with it?



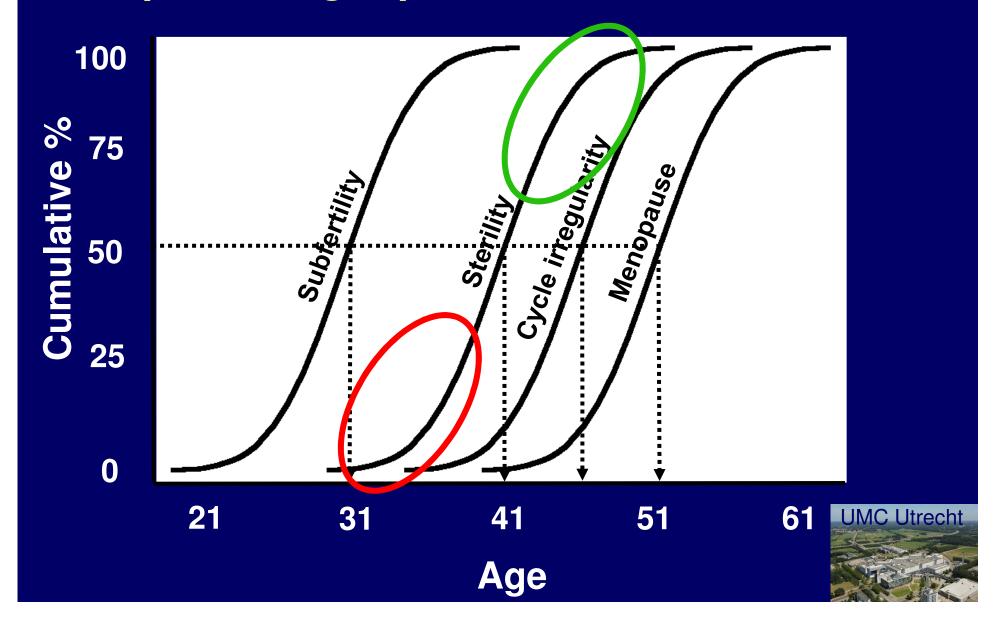
Ovarian Reserve =

quantity and quality decline of the ovarian follicle/oocyte pool





Variation in age at menopause and preceding reproductive events



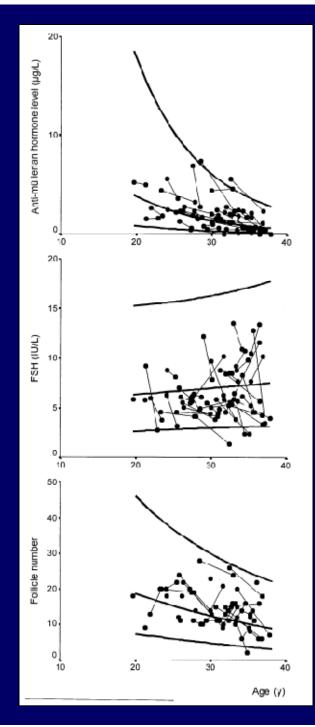
Ovarian Reserve Tests

- Mark the <u>size of the antral follicle</u> <u>cohort</u>
- This cohort is proportionally related the <u>primordial follicle pool</u>

Ovulation Selection Dominance CYCLIC RECRUITMENT INITIAL Graafian RECRUITMENT **Follicles** Antral Secondary **Primary** human **Primordial** 2-5 mm) Atretic (0.2-0.4 mm)Human 14 days 71 days >120 days

Quality????





AMH levels decline with female age in follow up, as do AF numbers, but not FSH, over a mean range of 2.1 years

De Vet, 2002

Comparison of ovarian reserve tests over time in normal fertile women (T₁ value and T₂ value, mean time interval 4 years).

	T ₁	T ₂	<i>P</i> value ^a
AMH (μg/L)	1.2 (0.1–3.0)	0.5 (0.0-2.2)	<.001
AFC (n)	6 (2–16)	6 (0–16)	.56
FSH (IU/L)	7.8 (4.9–12.7)	8.7 (5.2–45.7)	<.001
Inhibin B (ng/L)	104 (14–160)	78 (8–139)	.002
E ₂ (pmol/L)	180 (98–353)	155 (87–292)	.36

Note: Values are median (10th-90th) percentiles. See text for abbreviations.

van Rooij. Serum AMH reflects female reproductive decline. Fertil Steril 2005.

....and 4 years

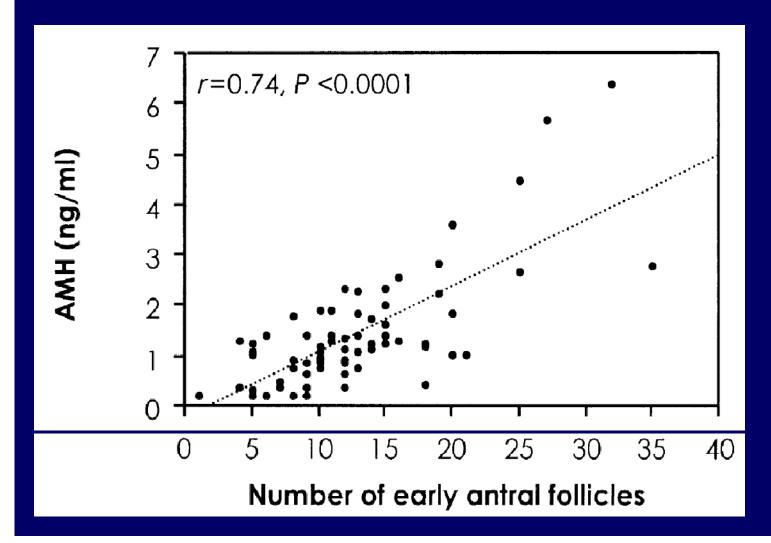
van Rooij, 2005



a Wilcoxon signed rank test.

AMH correlates well with the number of 2-10 mm antral follicles

Fanchin, 2003



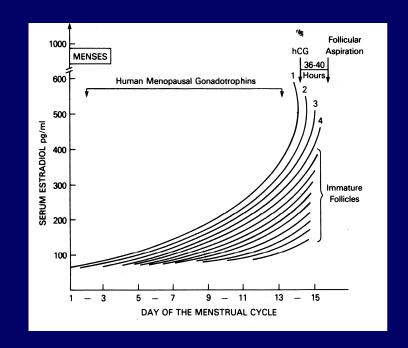


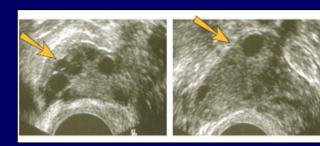
Has AMH proven to be a good marker for Ovarian Reserve for instance in IVF

=The number of follicles present in the "window of sensitivity".

=Ovarian Response.

=Expressed by female age ovarian reserve tests.

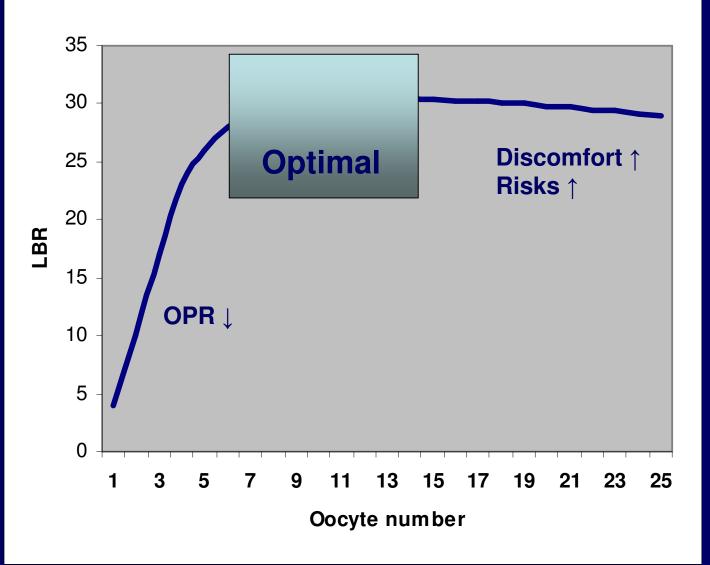




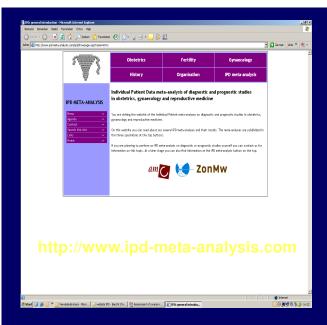


Balance...









N= 2500

AUC-ROC = 0.80

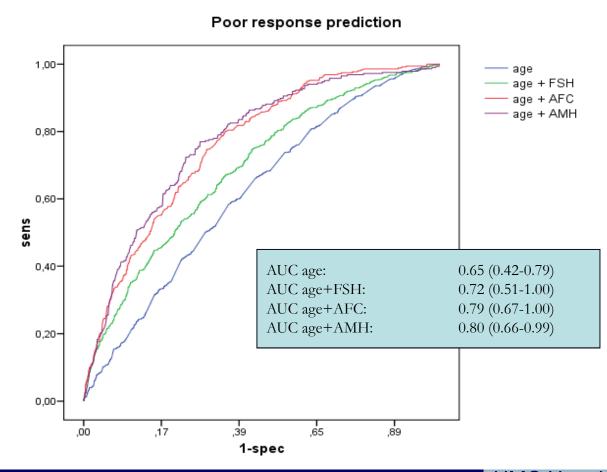
IMPORT collaborators

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- B. Popovic-Todorovic
- I.K. Vladimirov
- A. La Marca
- P.J.Q. vd Linden
- T. Eldar-Geva
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- N. Fenning
- J.M.J. SmeenkA.B. Copperman
- T. Ebner

Individual Patiente Data Analysis: the IMPORT study

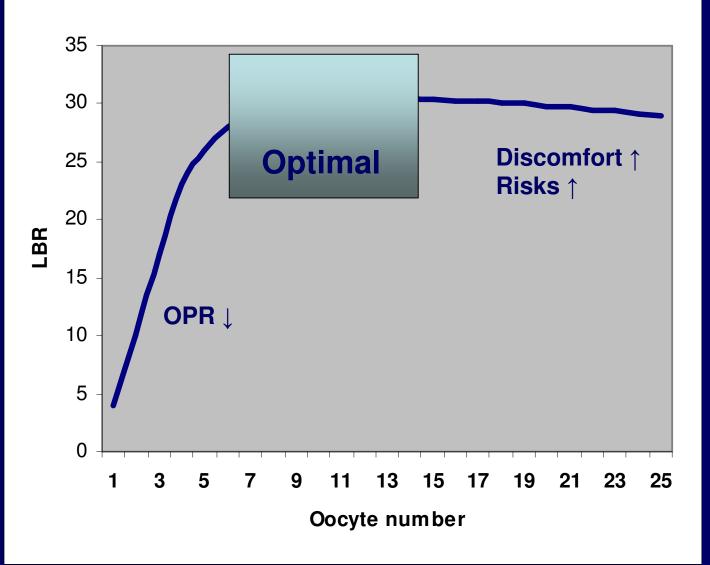
Added value to female age





Balance...



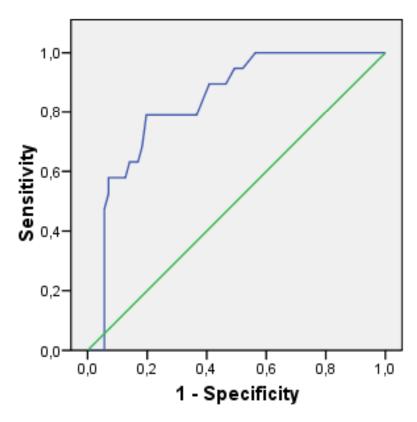




..ongoing literature **meta-analysis** on high response prediction from AMH... Broer, Dolleman, Broekmans, Mol

AMH, 8 studies

ROC Curve

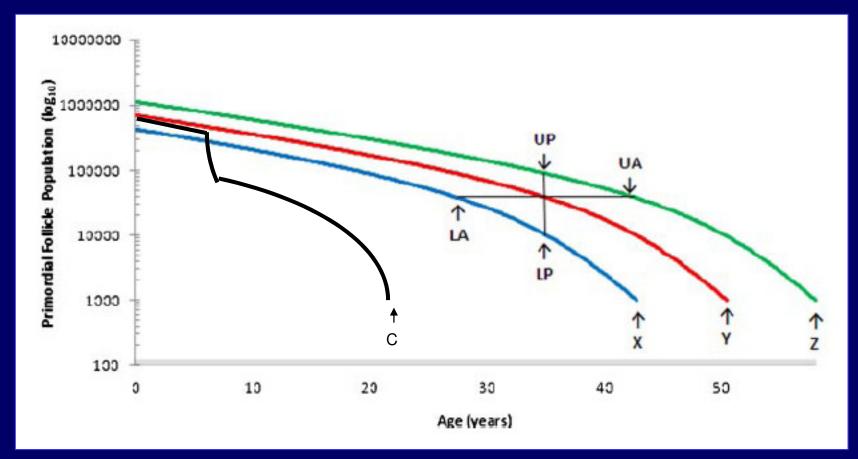


Diagonal segments are produced by ties.

AMH as predictor of excessive response is quite good



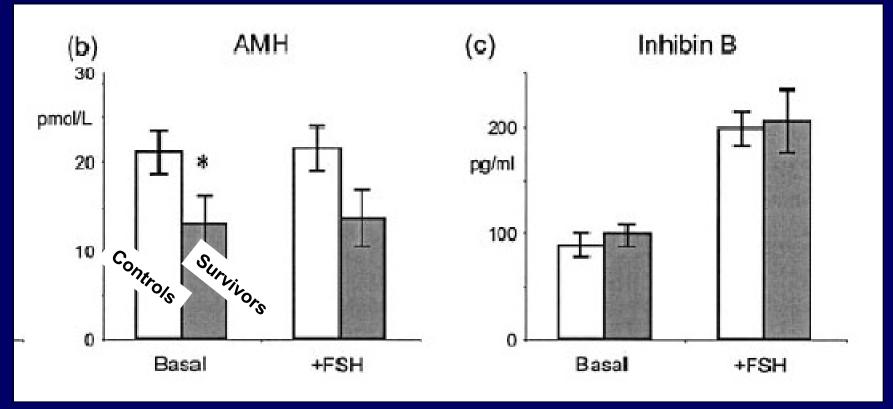
Effect of early-life iatrogenic ovarian damage on reproductive lifespan Can we predict early menopause??





HR, 2003

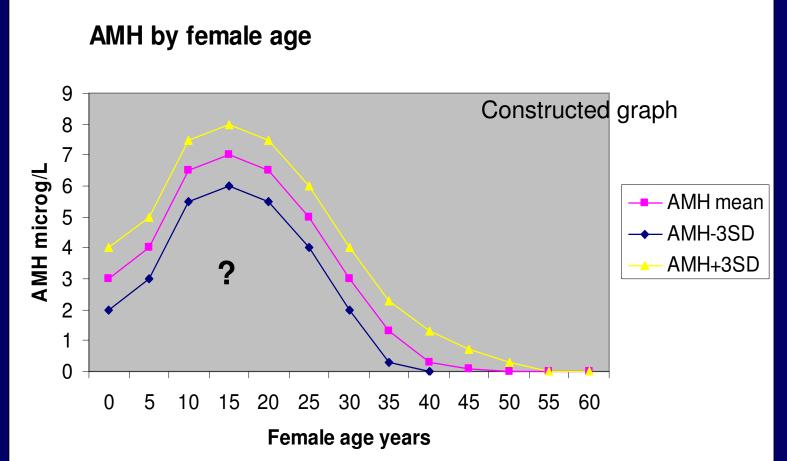
L.E.Bath^{1,3}, W.H.B.Wallace¹, M.P.Shaw¹, C.Fitzpatrick¹ and R.A.Anderson²





AMH serum levels and female age:

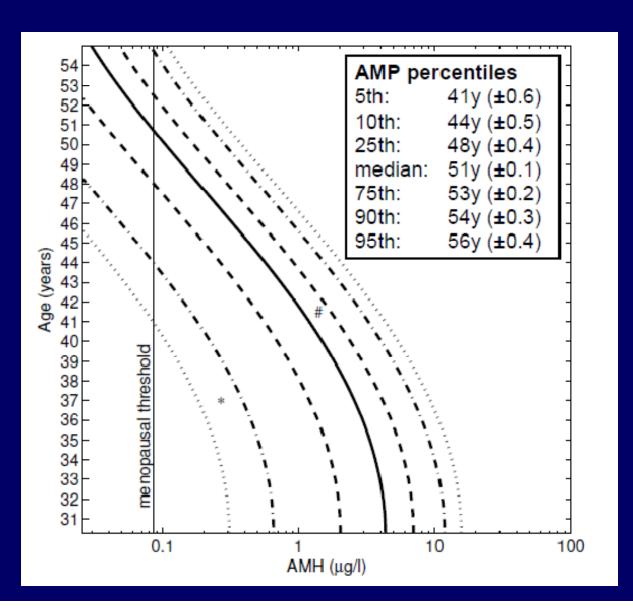
- not zero at birth and rise already before puberty (Lashen, pers comm)
- possible peak at puberty (Lashen)
- stable across twenties (Tremellen)
- gradual decline thereafter (van Rooij, de Vet, Sowers)





AMH as predictor of reproductive lifespan?

Disseldorp, JCEM 2008





AMH as test for Ovarian Reserve

- AMH can accurately predict response to hyperstimulation for IVF
- True value of OR testing in several clinical conditions remains to be elucidated



Agenda

- AMH physiology
- AMH as test for Ovarian Reserve
- AMH as diagnostic tool in PCOS



PCO Syndrome

Rotterdam 2003 Consensus - ≥ 2 of 3 criteria

- Oligo-Amenorrhea
- Hyperandrogenism
 (hirsutism / elevated FAI = Testosteron/SHBGx100)
- PCO ovaries at TVS
 (2-9 mm follicles >12
 volume > 10 ml
 1 or 2 ovaries)



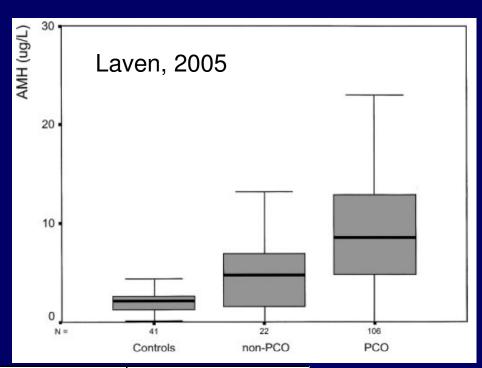


PCOS and AMH

- Can AMH be used in PCOS diagnosis??
- Is AMH useful as predictor of treatment outcome?



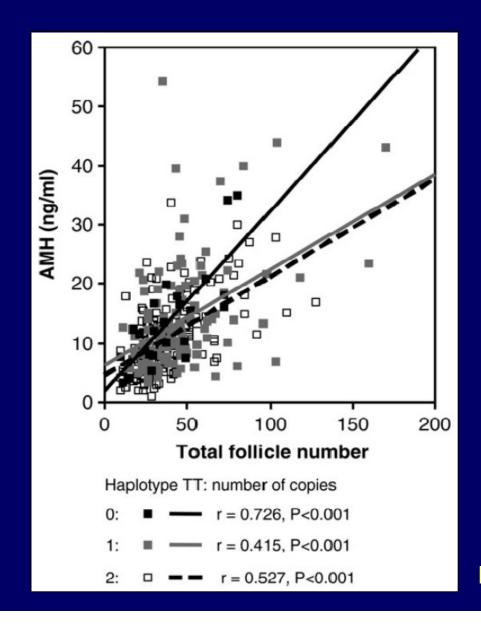
AMH levels in WHO II - PCOS are 2-3 times as high as in controls

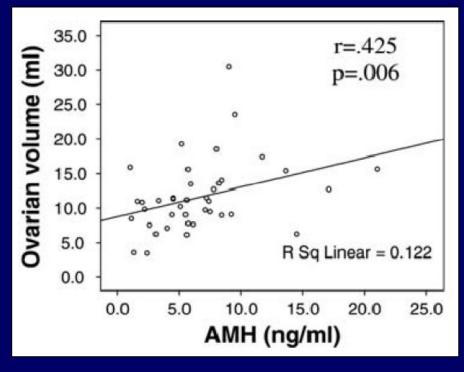


Author	Year	Number	AMH Controls	AMH PCOS
Cook	2002	47	2.4 ± 0.2 μg/l	5.3 ± 0.7 μg/l
Pigny	2003	104	2.9 ± 0.3 μg/l	6.6 ± 0.4 μg/l
Laven	2004	109	2.1 ± 0.6 μg/l	7.6 ± 1.8 μg/l
Piltonen	2005	170	2.4 ± 0.2 μg/l	8.1 ± 0.8 μg/l
Eldar-Geva	2005	52	1.6 ± 0.8 μg/l	5.1 ± 1.3 μg/l
La Marca	2006	34	3.5 ± 1.5 μg/l	7.4 ± 1.7 μg/l
Wachs	2007	27	2.1 ± 0.4 μg/l	7.2 ± 0.5 μg/l



In PCOS, AMH levels correlate with Ovarian volume and AFC



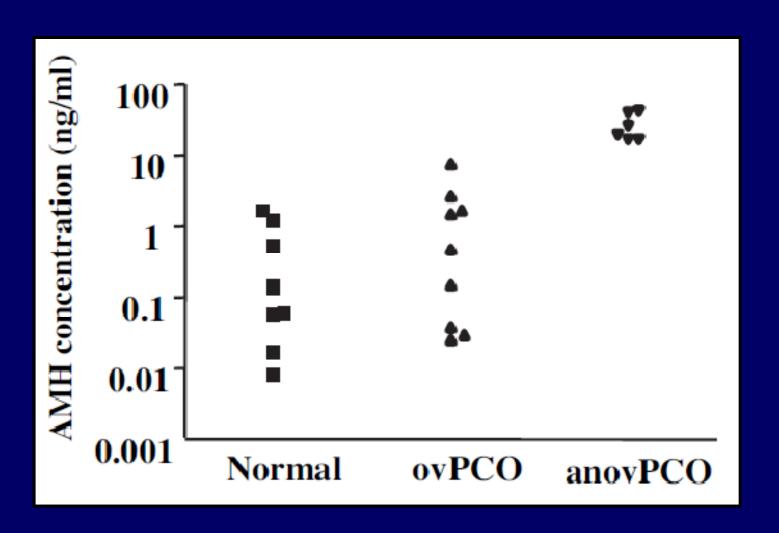


Chen, 2008

Kevenaar, 2009

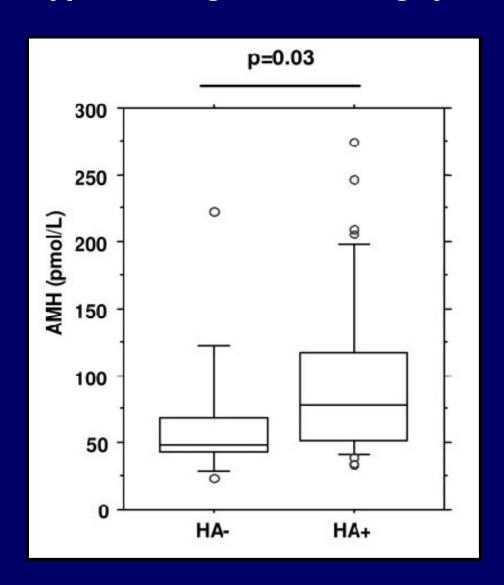


AMH in GC conditioned medium from unstimulated follicles is higher in PCOS cases, especially if anovulatory - Pellatt, 2007



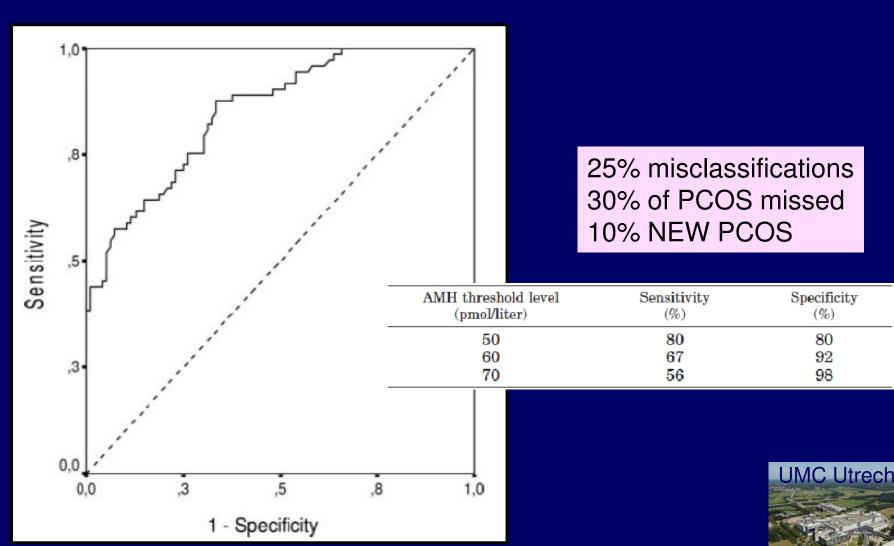


AMH levels are higher in PCOS cases with hyperandrogenism - Pigny, 2006





AMH discriminates normal cycling women from PCOS classified according to the Rotterdam Criteria - Pigny, 2006



80

92

98

Can AMH be used in PCOS diagnosis??

- Very promising
- More studies on AMH as replacement of PCO morphology are awaited





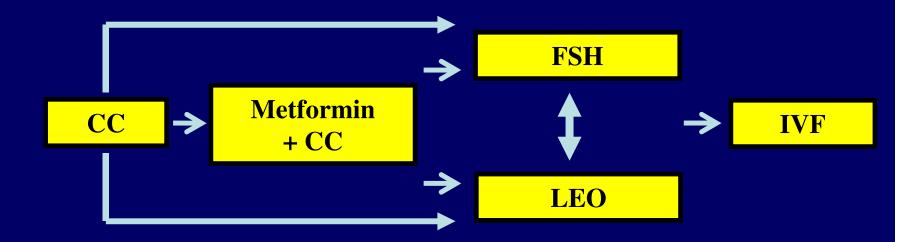
PCOS and AMH Two questions

- Can AMH be used in PCOS diagnosis??
- Is AMH useful as predictor of treatment outcome?



Ovulation induction WHOII/PCOS

- Treatment algorithm -



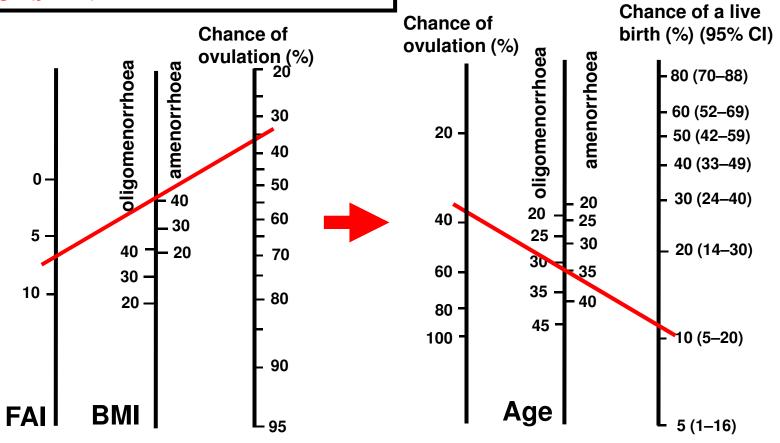
Weight Reduction/Caloric Restriction / Life Style changes



Required screening information:

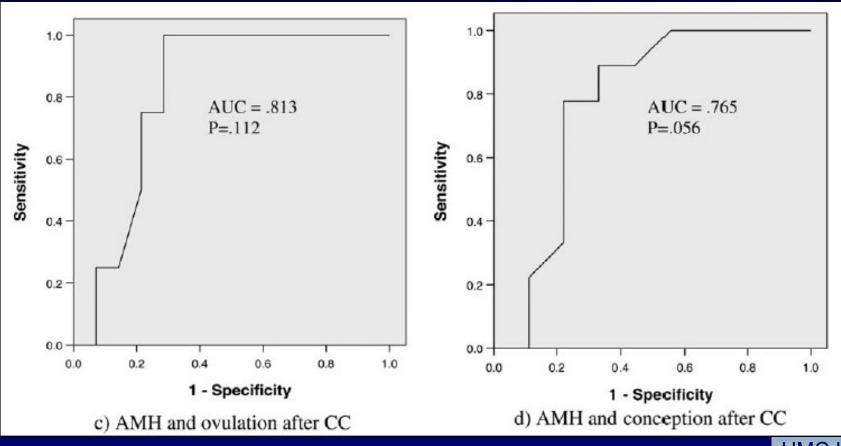
- oligomenorrhoea or amenorrhoea
- BMI (kg/m2)
- FAI (T×100/SHBG)
- age (years)

Nomogram: predicting live birth after clomiphene citrate



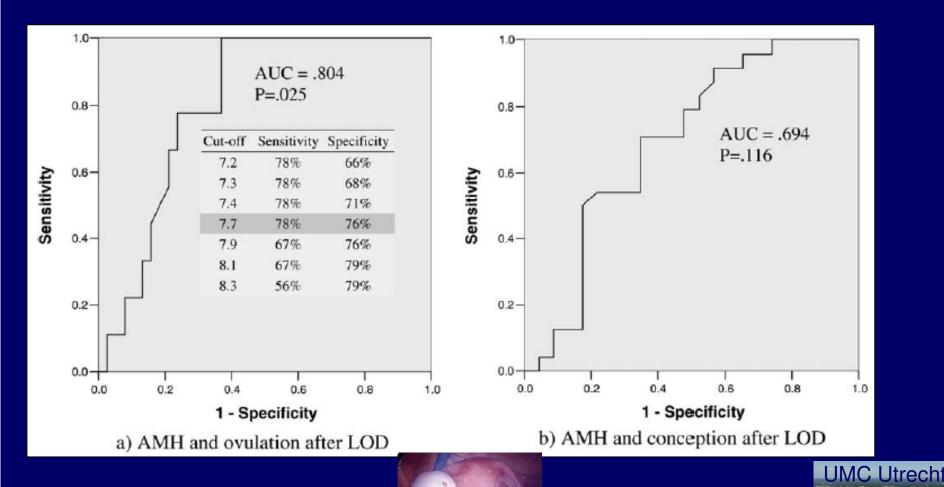


Prediction of treatment response from AMH levels in Clomiphene Citrate treatment - Amer, 2009





Prediction of treatment response from AMH levels in Laparoscopic Ovarian Electrocoagulation LEO - Amer, 2009



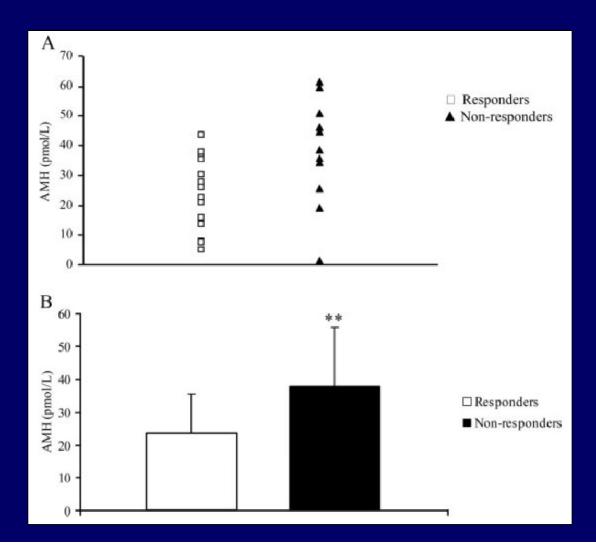
AMH levels decrease after Laparoscopic Ovarian Electrocoagulation LEO, especially in cases that become ovulatory - Amer, 2009

	AMH (ng/ml)		
	Pretreatment	Post-treatment*	
LOD	6.1 (1.0-21.0), n = 29	4.6 (0.3–15.1), a $n = 29$	
Clomiphene citrate	5.7 (1.3-9.5), n = 18	4.8 (2.7–9.2), <i>n</i> = 18	

Į.	Pre-LOD	Post-LOD (I week)	P- value*
Responders	5.6 (1.0-21.0)	4.3 (0.3–15.1)	0.002
Non-responders	9.0 (6.1–17.1)**	10.4 (4.3-12.7)	0.465



Baseline AMH levels in PCOS with overweight according to restoration of menstrual cyclicity after Weight Reduction program - Moran, 2007





Is AMH useful as predictor of treatment outcome?

- AMH useful as outcome predictor
- Replace amenorrhoea status and BMI?
- Large validation studies needed!



AMH in Ovarian Function Testing

- Reflects antral follicle number
- Cycle independent
- Predicts Poor and High ovarian response in IVF stimulation
- Future Aid in PCOS diagnosis and treatment...



Thank You



Simone Broer Jeroen van Disseldorp Monique Sterrenburg Marieke Verberg **Dave Hendriks** Ellen Klinkert Ilse van Rooij Laszlo Bancsi Kim Broeze (AMC) Brent Opmeer (AMC) Madeleine Dolleman

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