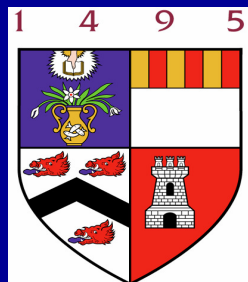


Vitrification of reproductive cells: The next breakthrough in ART?

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“breakthrough”

“Some signal achievement in scientific research”
but beware

“.....the word is being overused”
(Fowler’s English Usage)

“A sudden important development or success”
(Oxford Dictionary)

“A major achievement or success that permits further progress, as in technology.”
(American Heritage Dictionary of English)

Question

- Is vitrification a “*breakthrough*”?
- Does it progress ART further than equilibrium rate freezing has done?

Claims made for vitrification

Quicker

Simpler

More efficient

Less expensive

More successful

than equilibrium rate freezing

**Do we have the evidence to
support these claims?**

How successful is vitrification in practice?

- Practical advantages?
- Robust?

How successful is vitrification in practice?

- **Practical advantages?**
- **Robust?**
 - Demands on embryologist
 - Efficiency
 - Cost
 - Safety of recipients/storage/transport

How successful is vitrification in practice?

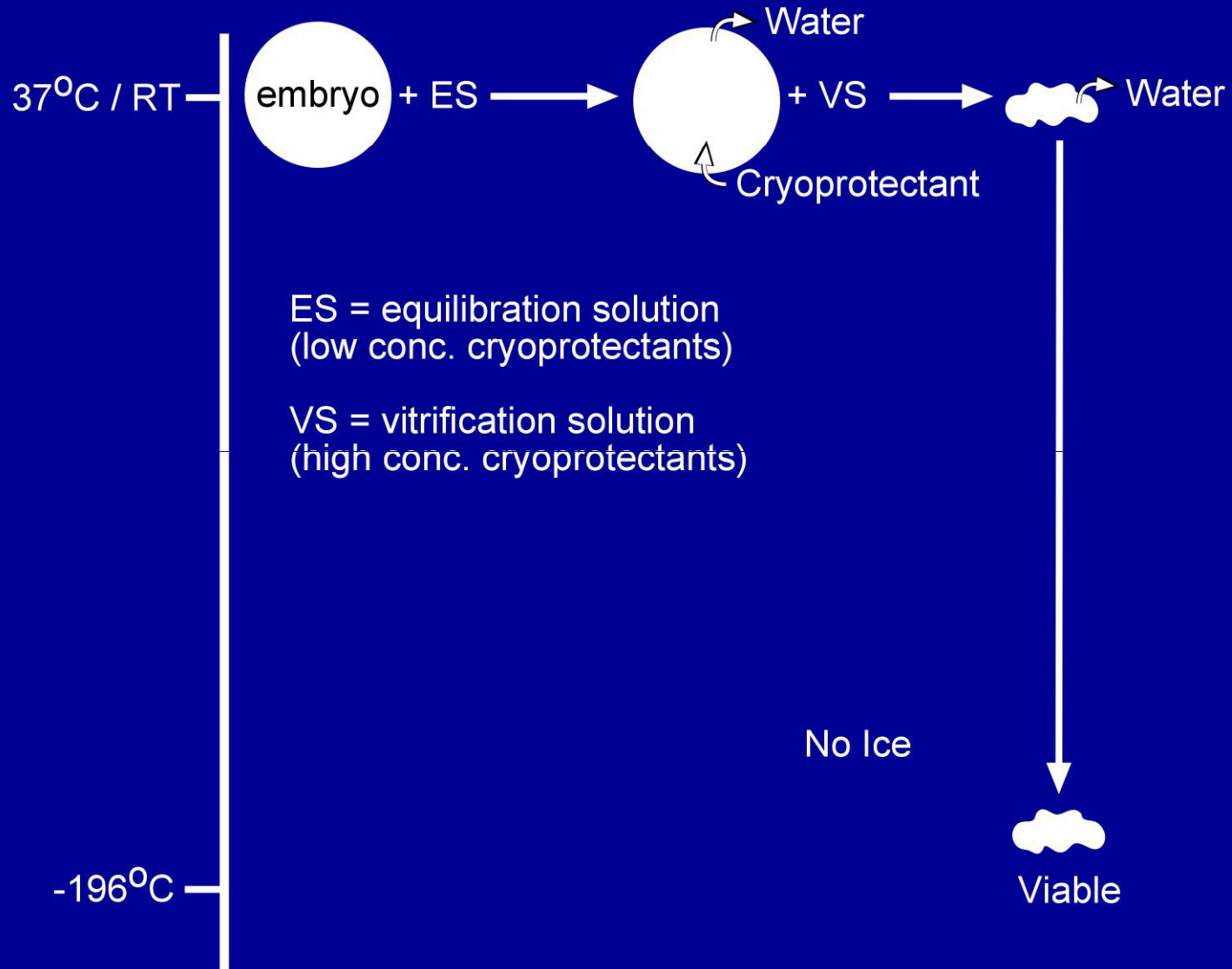
- Practical advantages?
- Robust?
- Improved survival?
- Improved live birth rate?
- Safe for children conceived?

Reproductive cells vitrified

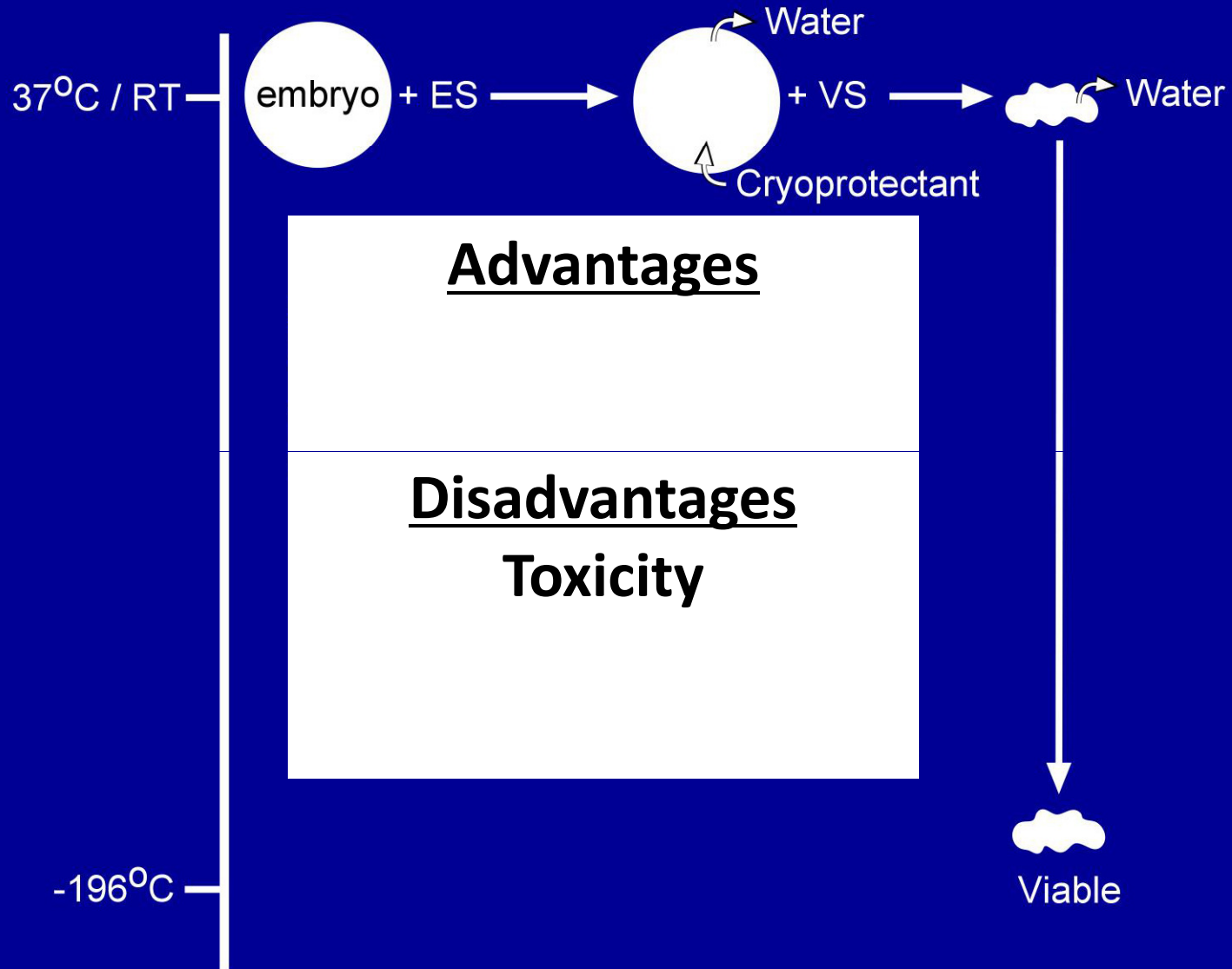
- Testicular tissue?
- Ovarian tissue
- Sperm
- Oocytes (GV and MII)
- Embryos

Vitrification in the laboratory

Vitrification



Vitrification

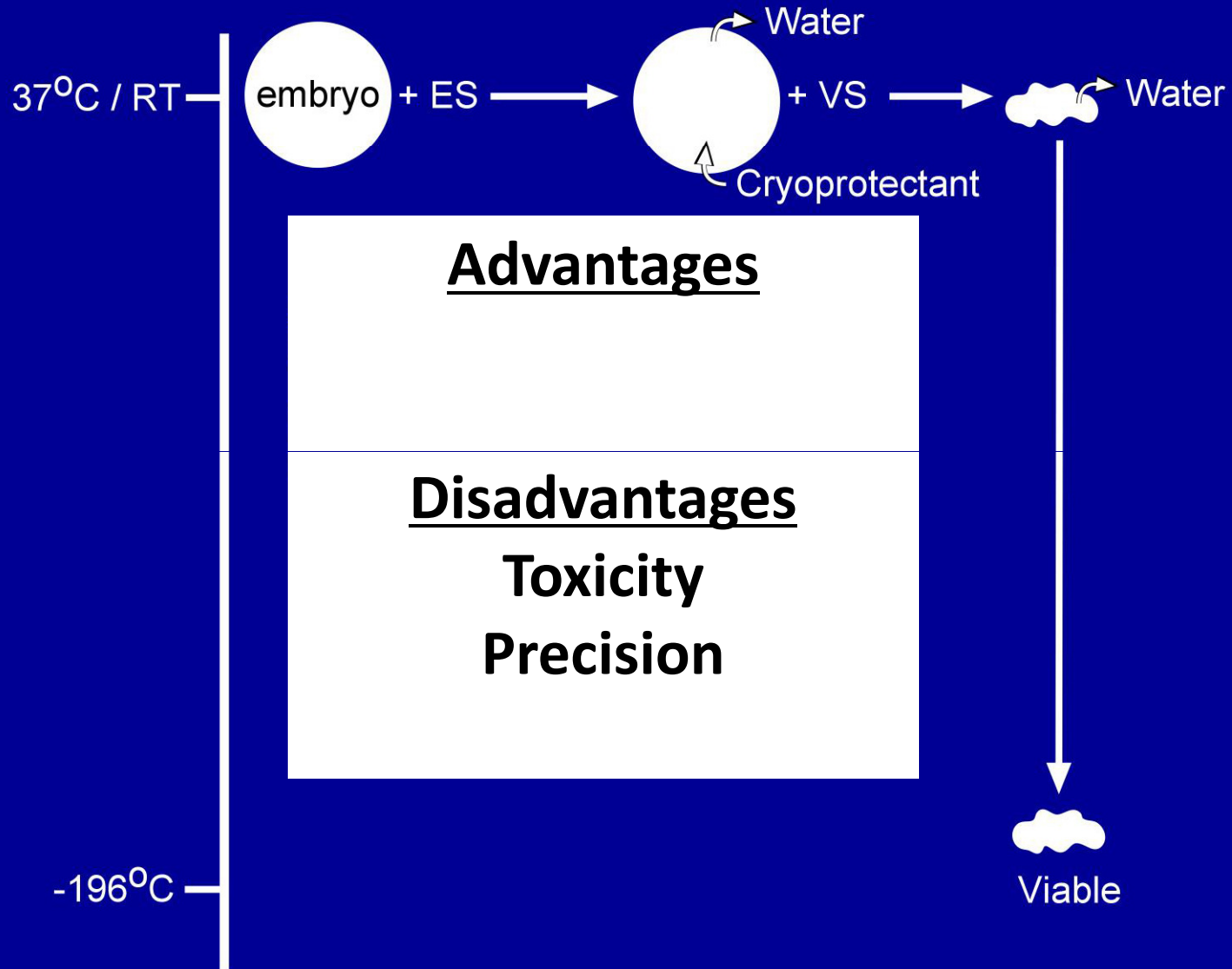


Advantages

Disadvantages
Toxicity

Viable

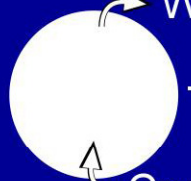
Vitrification



37°C / RT

embryo

+ ES



Water

Cryoprotectant

+ VS



Water

-196°C

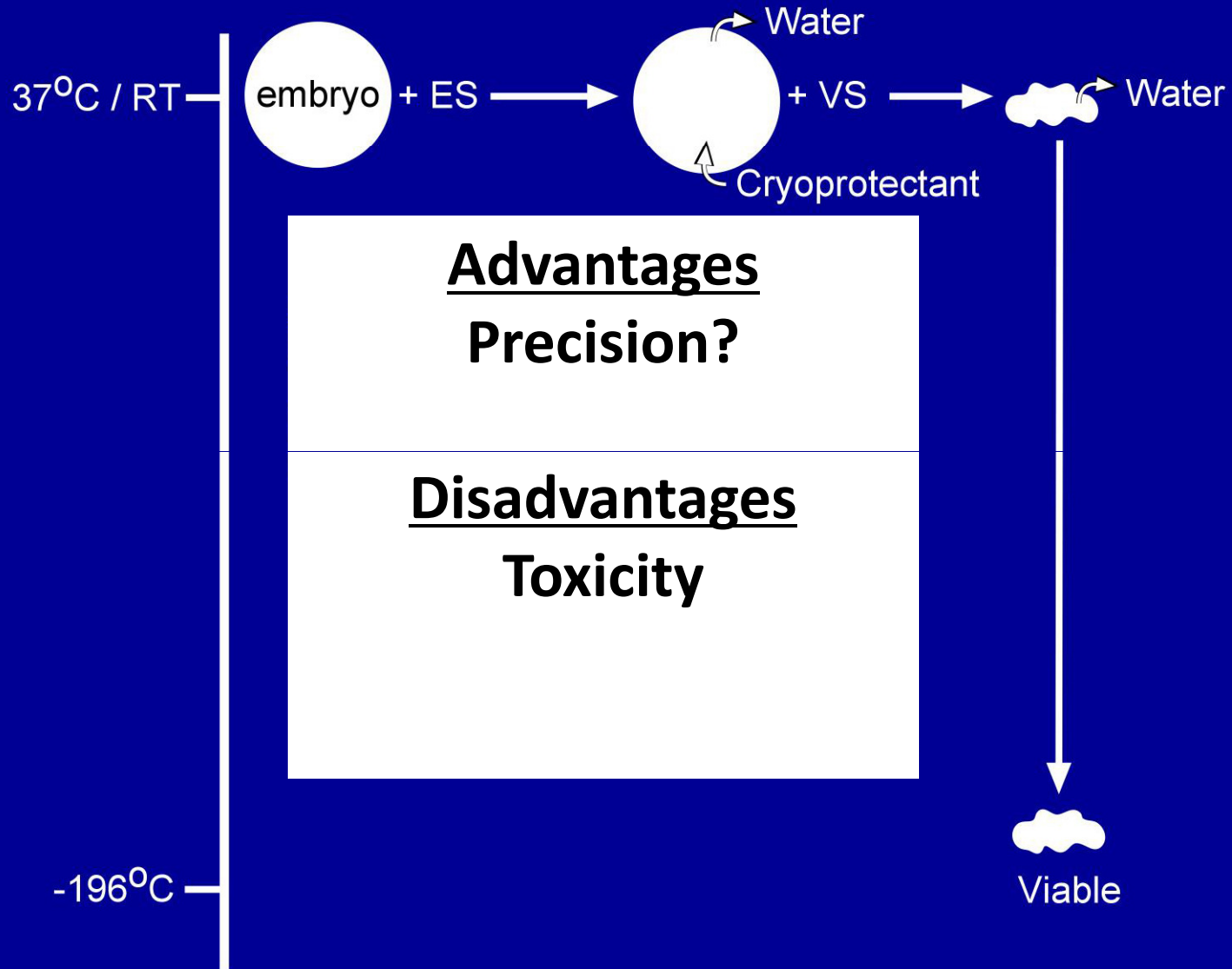
Advantages

Disadvantages
Toxicity
Precision



Viable

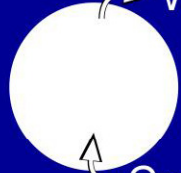
Vitrification



37°C / RT

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Water

Cryoprotectant

Advantages
Precision?

Disadvantages
Toxicity

-196°C

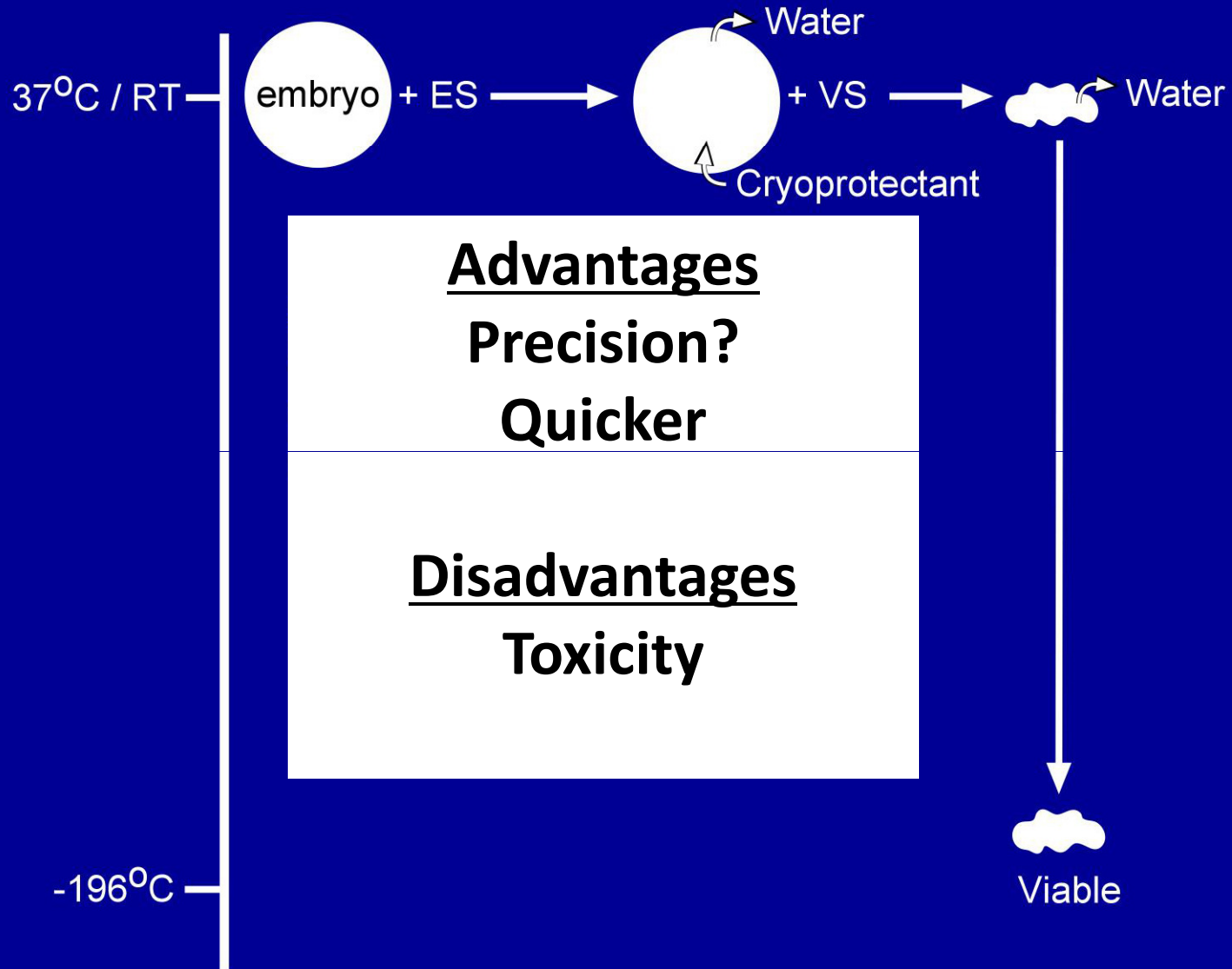


Viable

Requirements in the Lab

- Training
- Regular practice
- Uninterrupted concentration
 - Dedicated quiet area?
 - Additional staff?

Vitrification

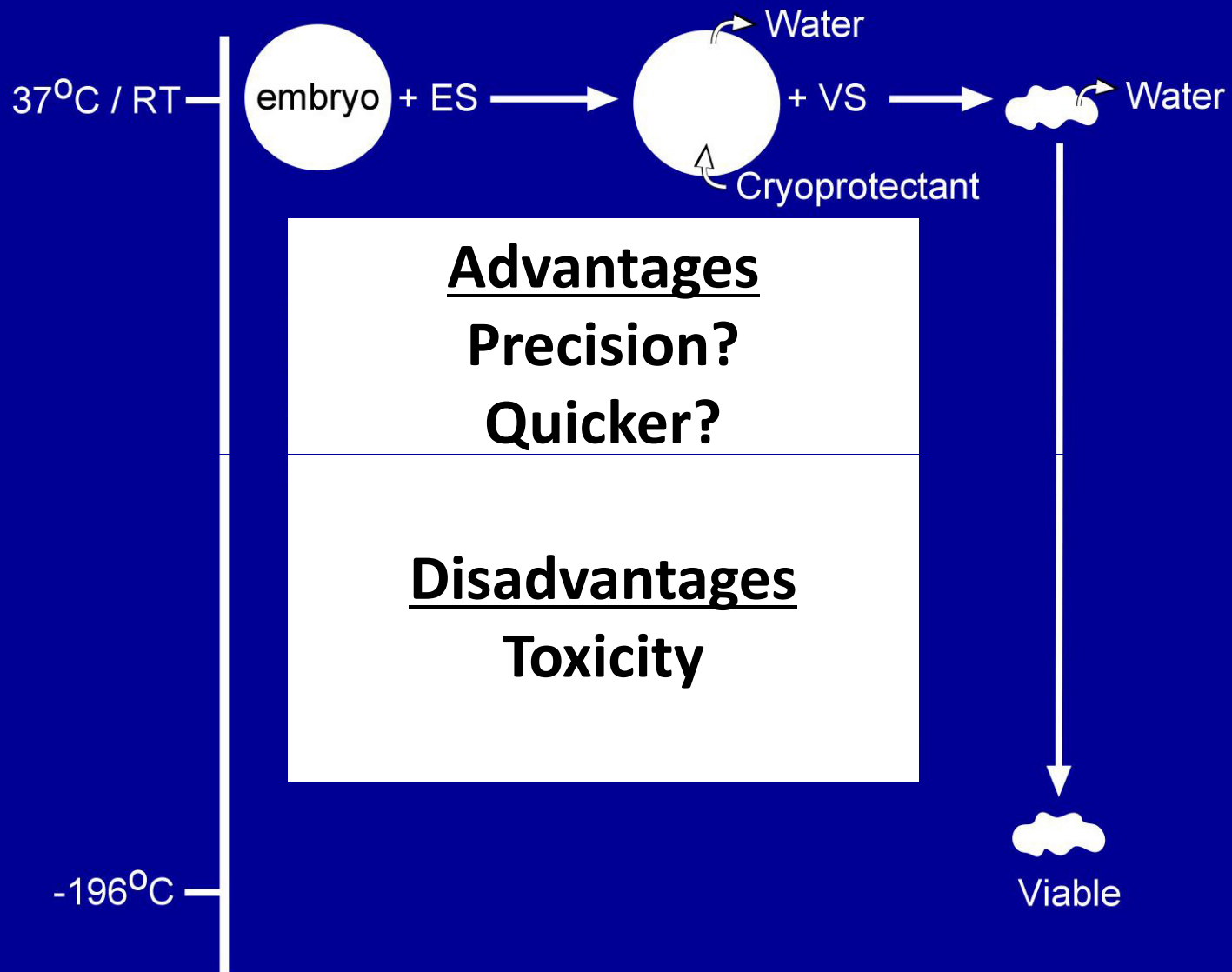


Advantages
Precision?
Quicker

Disadvantages
Toxicity

Viable

Vitrification



embryo + ES

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Water

Water

37°C / RT

-196°C

Advantages
Precision?
Quicker?

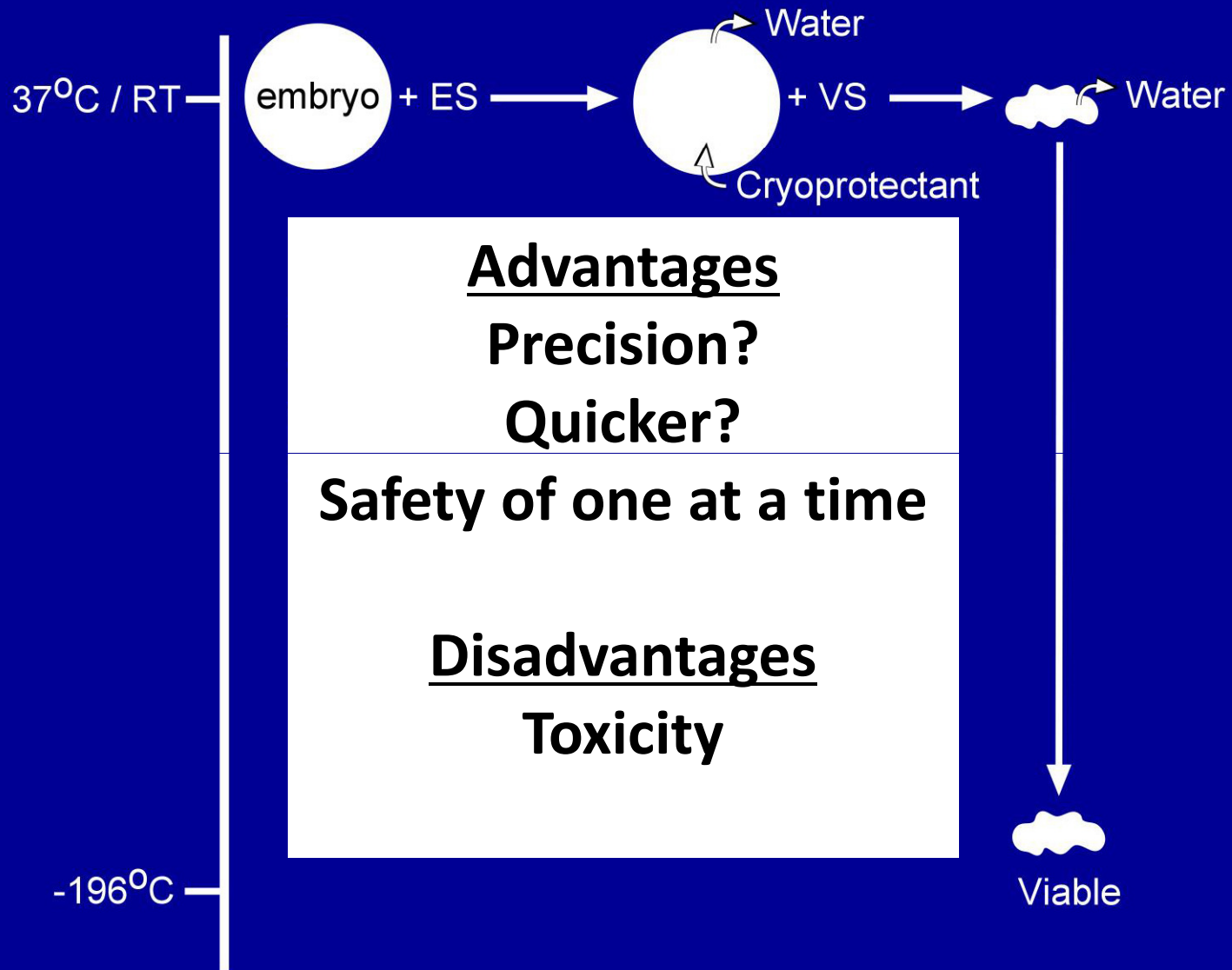
Disadvantages
Toxicity

Viable

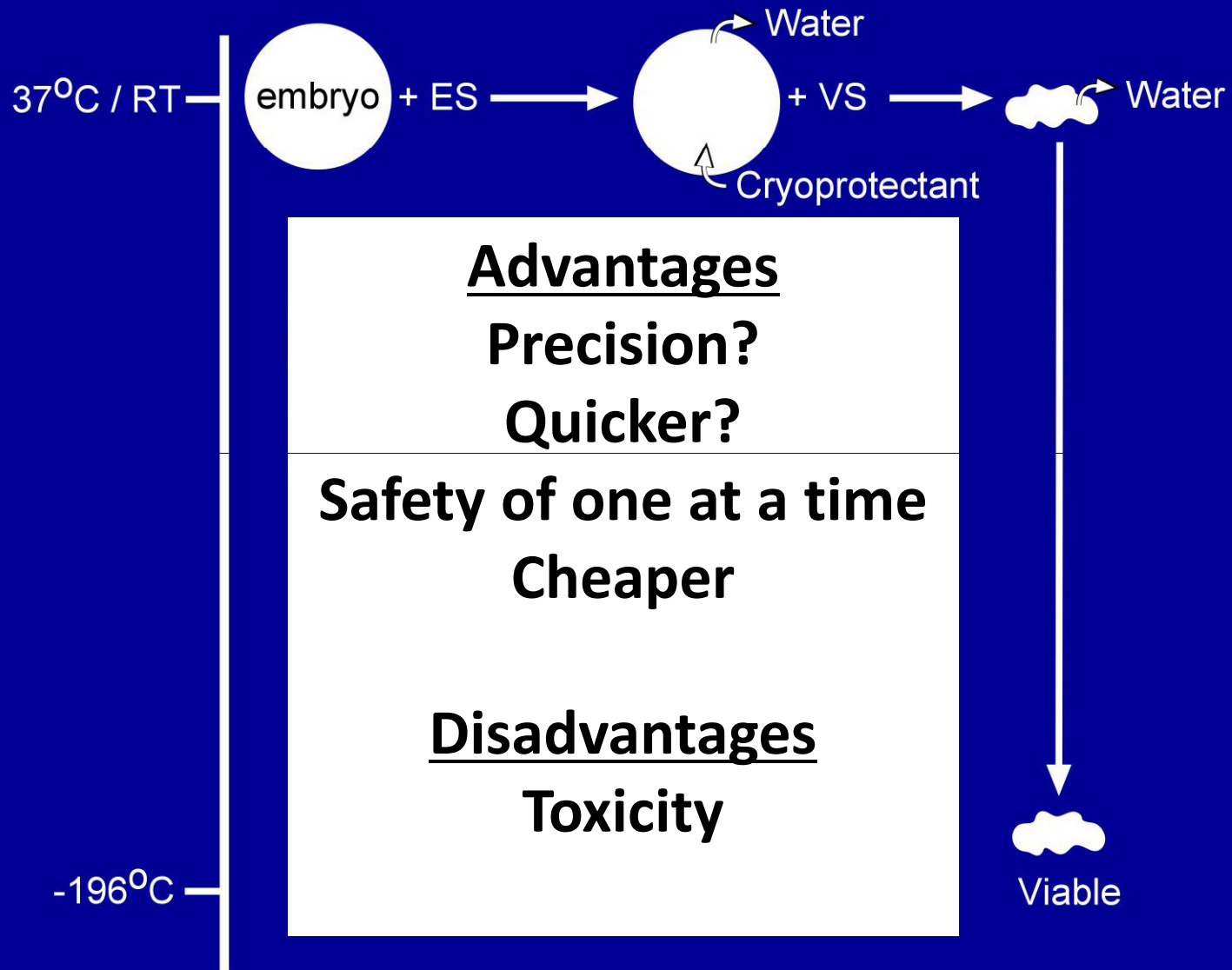
Increased efficiency for large groups?

- Load >1-2 oocytes/embryos
 - but hi survival and increased eSET
 - waste surplus
- Equilibrate large groups
 - validated?

Vitrification



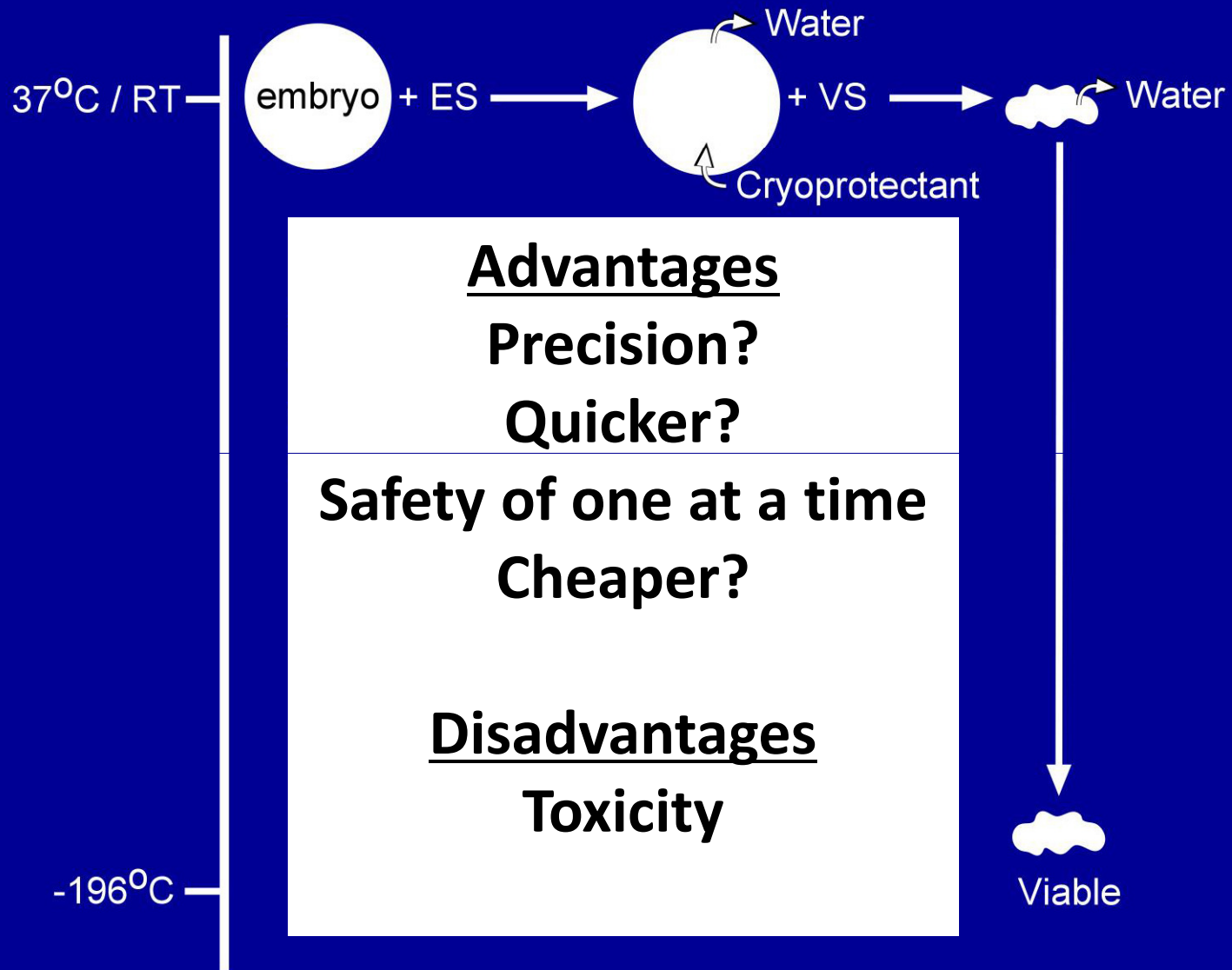
Vitrification



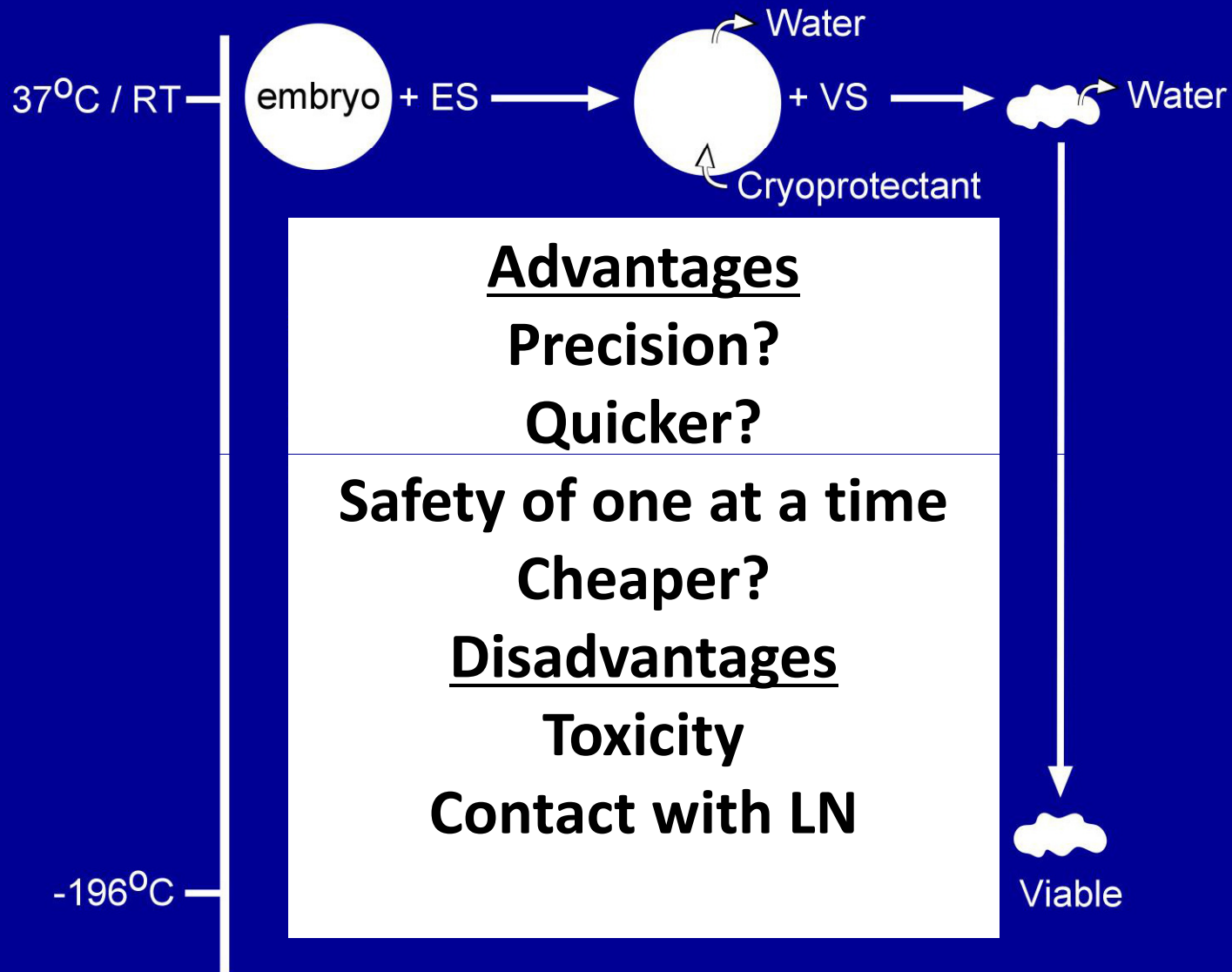
Is vitrification cheaper?

- No freezing machine
- Costly consumables
- More embryologists' time
- Capital outlay vs running costs

Vitrification



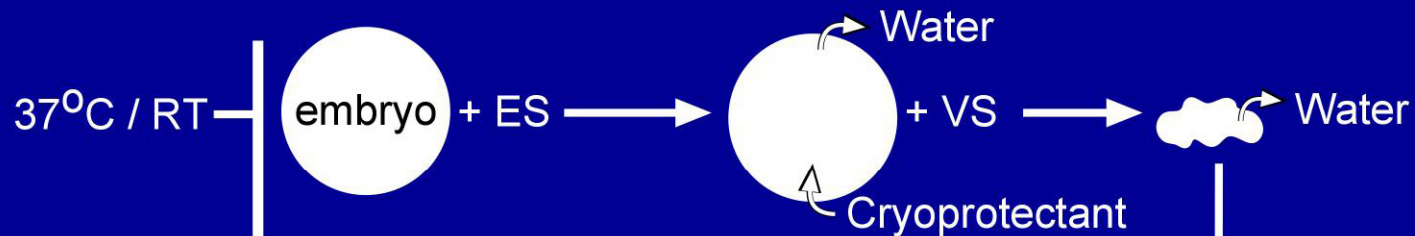
Vitrification



Open vs closed containers

- Do closed containers ↓ survival?
- Confront the problem
- More research
- Do not compromise practice

Vitrification



Advantages

Precision?

Quicker?

Safety of one at a time

Cheaper?

Disadvantages

Toxicity

Contact with LN

Storage of tiny samples

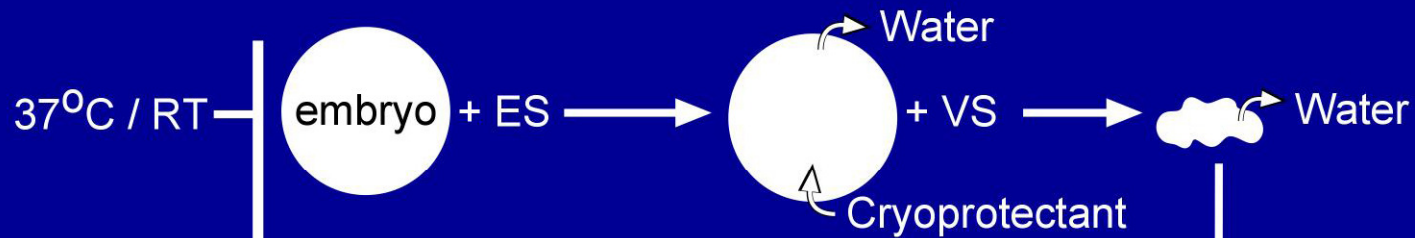


Viable

37°C / RT

-196°C

Vitrification



Advantages

Precision?

Quicker?

Safety of one at a time

Cheaper?

Disadvantages

Toxicity

Contact with LN

Storage of tiny samples

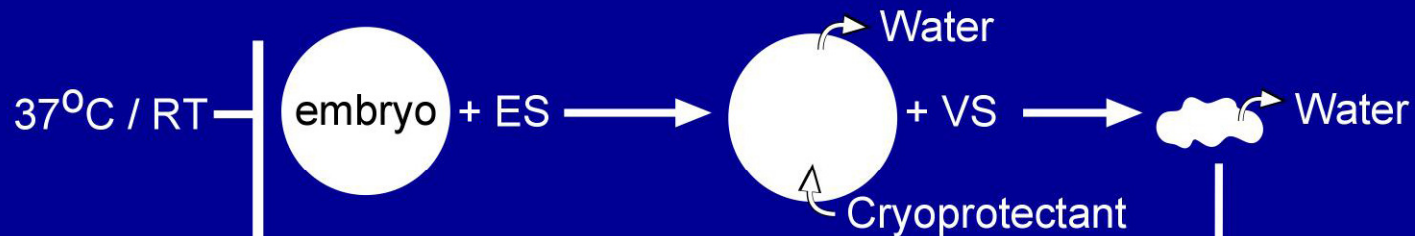
Stability

Viable

Storage of vitrified samples

- Frozen gametes and embryos
 - viable after many years
- Vitrified oocytes and embryos
 - long term safety not proven
 - follow up essential

Vitrification



Advantages

Precision?

Quicker?

Safety of one at a time

Cheaper?

Disadvantages

Toxicity

Contact with LN

Storage of tiny samples

Stability

Transport

↓
Viable

Transport

- Warn patients of risks
- Preparation of shipper
- Strict control during transport
- Speed moving samples in and out
- Precise protocols in advance
- Practise

Vitrification in clinical practice

How successful is vitrification in practice?

- Practical advantages?
- Robust?
- **Improved survival?**
- **Improved live birth rate?**
- Safe for children conceived

Post-warming survival of cryopreserved embryos

	Vitrification (N)	Freezing (N)	Odds Ratio [95% CI]
Cleavage stage*	94% (490)	74% (484)	6.35 [1.14-35.26]
Blastocyst Stage**	90% (252)	70% (217)	4.09 [2.45-6.84]

* 4 RCT; ** 2 RCT

From Kolibianakis *et al* (2009) *Current Opinions in Obstet and Gynaecol.* 21:270

Blastocyst development from cryopreserved embryos*

Vitrification (N)	Freezing (N)	Odds Ratio [95% CI]
53% (268)	48% (214)	1.56 [1.07-2.27]

* 2 RCT

Meta-analysis by Kolibianakis *et al*, 2009

Clinical Outcome - Embryos

Clinical pregnancy: 3 RCT
OR 1.66, 95% CI 0.98-2.79
(Kolibianakis *et al*, 2009)

Live birth: 1 RCT
33% (N=40) vs 13% (N=23)
(Rama Raju *et al*, 2005)

Survival of biopsied embryos

Method	Embryos (N)	% Survived	% Blastocyst
Slow freeze	Control (53)	85	20
Slow freeze	Biopsied (52)	16	2
Modified freeze	Biopsied (52)	75	23
Modified thaw	Biopsied (50)	76	14
Vitrification	Biopsied (49)	94	18

Zheng *et al* 2005

Timely to revisit some of our freezing protocols?

“More than one way to skin a cat”



Oocyte vitrification

- Theoretically vitrification offers better protection than freezing

Oocyte vitrification

- Theoretically vitrification offers better protection than freezing
- Results encouraging:
 - Hi rates survival
 - >392 children born
- 1 completed RCT and 1 ongoing
- Reserve judgement

**Is vitrification of reproductive cells
riskier than freezing for the children
conceived?**

We do not know!

Cryopreservation follow-up

		Number of births	Follow-up
Embryos	Frozen	Many thousands	↑ Major malformation?
	Vitrified	Several thousand	?
Oocytes	Frozen	>532	6 birth defects
	Vitrified	>392	6 birth defects

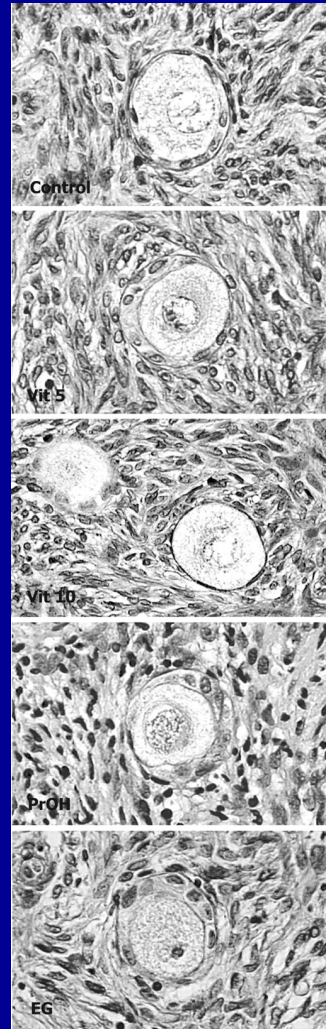
Risks of cryopreservation

- Possibility epigenetic effects?
 - Long term follow-up
 - Open mind

Vitrified ovarian tissue

- Preserve architecture and cell connections >

Light microscopic images of non-frozen (Control), vitrified (Vit 5 and Vit 10) and cryopreserved human ovarian cortex after using slow freezing programmes with PrOH and EG cryoprotectants



Control

Vitrified

Frozen

Keros, V. et al. Hum. Reprod. 2009 24:1670-1683; doi:10.1093/humrep/dep079

Vitrified ovarian tissue

- Preserve architecture and cell connections
- Freezing and vitrification → similar preservation oocytes and granulosa cells
- Vitrification → better preservation stroma
- No extensive functional tests
- No clinical use

Sperm vitrification

- Open/closed container
- No penetrating CPA
- Moderate – ultra-rapid cooling
- Rapid warming
- Fertilisation → blastocyst
- No clinical application

Is vitrification better than freezing?

	Embryo	Oocyte	Sperm	Ovarian tissue
Laboratory	Yes/No	Yes/No	?	Probably
Storage				
Survival				
Live birth				
Safety for children				

Is vitrification better than freezing?

	Embryo	Oocyte	Sperm	Ovarian tissue
Laboratory	Yes/No	Yes/No	?	Probably
Storage				
Survival	Yes?	Possibly	Similar	Possibly
Live birth				
Safety for children				

Is vitrification better than freezing?

	Embryo	Oocyte	Sperm	Ovarian tissue
Laboratory	Yes/No	Yes/No	?	Probably
Storage	?	?	?	?
Survival	Yes?	Possibly	Similar	Possibly
Live birth	?	?	ND	ND
Safety for children	?	?	ND	ND

Summary

- **Is vitrification better than freezing?**
 - Lack of sound evidence
 - Prospective randomised comparisons
 - Focus on live birth rates
 - Assess “robustness” in various clinics
 - Safety during storage
 - Re-examine freezing protocols

Conclusion

Vitrification “*very promising*”
but not yet
a “*breakthrough*” in ART