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What did we learn from the review of 1000 natural cycles for IVF/ICSI?

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Return to the Natural Cycle for in Vitro Fertilization (Alleluia! Alleluia!)¹

JAIRO GARCIA²

Journal of in Vitro Fertilization and Embryo Transfer, Vol. 6, No. 1, 1991



New definition of success, which is different from the past (number of oocytes and embryos, implantation or pregnancy rates)

Efficacy of natural cycle IVF

- Systematic literature review (20 selected studies)

Pellinck et al. Hum Reproduction Update 2002;8:129-139.

1800 natural cycles embryo transfer rate 45.5 %
pregnancy rate per cycle 7.2 %
pregnancy rate per transfer 15.8%

Cancellation of OPU

Ovulation triggering with HCG: rate of oocyte retrieval per cycle 67.3%
Timing of spontaneous LH surge: rate of oocyte retrieval per cycle 80.6 %

Oocyte recovery rate: 88.6 %

Fertilization rate

Cycles with IVF : 44.2 to 100 %

Cycles with ICSI: 56.3 to 62.5%



- Natural cycle as substitute for stimulated IVF / ICSI cycle

- Natural cycle in management of poor responders on COH

16.6% pregnancy rate per OPU in 35 cycles

Lindheim et al. 1997

18.6% pregnancy rate per OPU in 16 cycles

Bassil et al. 1999

20.0 % pregnancy rate per OPU in 44 cycles

Feldman et al. 2001

9.8% pregnancy rate per OPU in 500 cycles

Schimberni et al. 2008

- Natural cycle IVF combined with IVM

40.4% pregnancy rate per OPU in 151 cycles

Lim et al. 2008

Factors affecting pregnancy success of IVF in natural cycles

- Patient age
- Indications for IVF
- Previous IVF treatment
- Baseline value of FSH, LH, PRL
- Embryo, oocyte and semen quality
- Endometrial thickness
- Day of ET
- Serum E₂ level on day of hCG administration
- etc.



Natural cycle

- **Accurate monitoring**
- Selection of patients
- Method : IVF or ICSI ?
- Embryo transfer : day 2 or day 5 ?
- Influence of patient's age
- Luteal supplementation
- Efficacy

Factors affecting pregnancy success of IVF in natural cycles

Accurate timing of hCG administration

Criteria:

- Serum estradiol level E_2 ($0.4-1.1 \text{ nmol/L}$)
- Follicle size ($15-20 \text{ mm}$)
- Endometrial thickness (7 mm)
- Negative LH test
- Day of menstrual cycle ($17-18$ before anticipated menstruation)

When is the correct moment to induce final oocyte maturation?

Protocol 1

- Follicle diameter: $>17\text{mm}$
- Endometrial thickness $>7\text{mm}$
- E_2 not measured !



When is the correct moment to induce final oocyte maturation ?

Protocol 2

(Paulson et al.1993)

When the dominant follicle attained 16-20 mm.

or

Estradiol levels were indicating satisfactory follicular development ($>1.1 - 0.73 \text{ nmol/L}$).

Follicular diameter

Estradiol level

16 mm
18 mm
20 mm

1.1 nmol/L
0.91 nmol/L
0.73 nmol/L

When is the correct moment to induce final oocyte maturation ?

Protocol 3

(Maribor IVF)

When the dominant follicle attained $>15 \text{ mm}$.

and

Estradiol levels were indicating satisfactory follicular development
 $> 0.49 \text{ nmol/L}$

Comparisson between the cycles with pregnancy and cycles without pregnancy

Variable	Cycles with pregnancy	Cycles without pregnancy	P value
Duration of infertility (years)	5,75 ± 4,22	6,78 ± 4,37	NS
Baseline value of FSH (IE)	6,44 ± 3,09	6,95 ± 1,53	NS
Baseline value of LH (IE)	4,55 ± 1,97	4,40 ± 1,58	NS
E ₂ level on day of HCG i. (nmol/L)	0,825 ± 0,231	0,725 ± 0,233	0,018
Average follicular diameter (mm)	15,59 ± 1,34	15,53 ± 1,32	NS
Max. follicular diameter (mm)	16,90 ± 1,57	16,66 ± 1,57	NS
Endometrial thickness (mm)	8,24 ± 1,70	8,16 ± 1,62	NS
Day of HCG injection	11,54 ± 2,81	10,54 ± 2,32	0,014

Estradiol pattern predicts natural IVF/ICSI outcome

Prospective study: 305 natural IVF/ICSI cycles

Serum estradiol concentrations were determined :

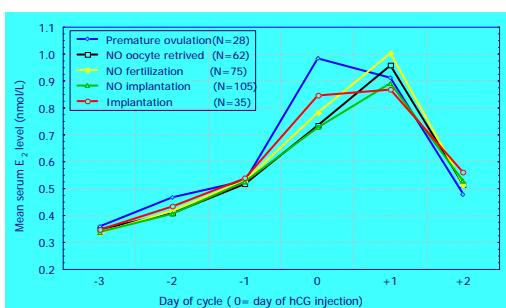
- on day 2 of menstrual cycle
- every 2 days from day 7 onward
- every day when the follicular diameter was >12 mm and serum E₂ concentration >0.3 nmol/L.
- DAY 0 - on day of hCG inj. (~12 hours before hCG inj.)
- DAY 1 (12-17 hour after hCG inj.)
- DAY 2 - day of oocyte recovery

A comparison of serum E₂ levels on day 0, day 1 and their ratio between cycle groups

E2 level (nmol/L)	Conception cycles	Nonconception cycles	p value
Day 0	0.82 ± 0.23	0.72 ± 0.23	0.018
Day 1	0.85 ± 0.28	0.91 ± 0.31	NS
Day 1/Day 0	1.06 ± 0.35	1.30 ± 0.36	<0.001

Multiple logistic regression: E₂ level on day 0, B=1.60, p= NS
E₂ day 1/day 0 ratio, B=-2.21, p=0.007

Preovulatory serum estradiol pattern in 305 natural IVF/ICSI cycles



Rejic M & Vlaisavljevic V JARG 1999

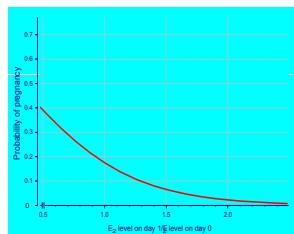
Outcome of natural IVF/ICSI cycles according to 1.1 E₂ on day 1 / E₂ on day 0 ratio

	E ₂ on day 1 / E ₂ on day 0	≥1,1	<1,1
	182	123	
Premature ovulation rate	3.3 (6/182)	17.9 (22/123)	<0.001
Oocyte recovery rate	74.4(131/176)	83.2 (84/101)	
Fertilization rate	70.2 (92/131)	70.2 (59/84)	
Implantation rate	12.8 (11/86)	44.4 (24/54)	<0.001
Pregnancy rate per cycle	6.0 (11/182)	19.5 (24/123)	<0.001

Rejic M et al., Fertil Steril 2001

Probability of pregnancy in relation to E2 ratio in cycles without premature ovulation

- A higher pregnancy rate and lower cancellation rate was obtained when hCG was applied in lower values of serum E2 and smaller follicle diameter.
- In predicting the outcome of natural IVF/ICSI cycles, the importance lies not in E2 levels on the day of hCG administration or on the day after, but rather in the E2 ratio.



Interval in which spontaneous LH rise can be expected calculated from duration of menstrual cycle (mean and standard deviation of 6 menstrual cycles)

SD	26	26.5	27	27.5	28	28.5	29	29.5	30	30.5
0.2	11-14	11-14	12-15	12-15	12-15	13-16	13-16	14-17	14-17	14-17
0.5	11-14	11-15	11-15	12-15	12-16	12-16	13-16	13-17	14-17	14-18
0.7	10-14	11-15	11-15	12-15	12-16	12-16	13-17	13-17	13-17	14-18
1.0	10-15	11-15	11-15	11-16	12-16	12-16	12-16	12-17	13-18	14-18
1.3	10-15	10-15	11-16	11-16	11-16	12-17	12-17	13-17	13-18	13-18
1.7	10-15	10-16	10-16	11-16	11-17	11-17	12-17	12-18	13-18	13-19
2.0	9-15	10-16	10-16	10-17	11-17	11-17	12-18	12-18	12-18	13-19
2.5	9-16	9-16	10-17	10-17	10-17	11-18	11-18	12-19	12-19	12-19

Characteristics of 583 natural IVF/ICSI cycles monitored with three different protocols

	Protocol A	Protocol B	Protocol C
Started cycles	101	151	335
IVF/ICSI	1.0	2.1	1.9
Mean follicle diameter	18.5 mm	17.5 mm	15.6 mm
Mean estradiol on day of hCG (nmol/L)	Not analysed	0.93	0.75
Cancellation rate	41.5	27.1	9.5
Spontaneous ovulation or LH surge (%)			

Outcome of 583 natural IVF/ICSI cycles monitored with three different protocols

	Protocol A	Protocol B	Protocol C
Oocyte recovery rate (%)	90.0	88.9	78.9
Fertilization rate (%)	77.7	75.2	73.2
ET rate per oocyte pick-up (%)	60.0	55.0	52.1
Pregnancy rate per ET (%)	16.6	10.0	24.6
Pregnancy rate per puncture (%)	10.0	5.5	12.8
Delivery rate per puncture (%)	5.0	4.6	8.2

Vlaisavljevic V., et al. J Reprod Med 2001

Natural cycle

- Accurate monitoring
- Selection of patients

Pregnancy rates depending on indication for IVF/ICSI procedures in 308 natural cycles		
Indications for IVF procedure	PR/ puncture (%)	PR/embryo transfer (%)
Female infertility only	12,28 (14/114)	21,21 (14/66)
- Tuboperitoneal cause (without hydrosalpinx)	13,04 (9/69)	22,50 (9/40)
- Tuboperitoneal cause (with hydrosalpinx)	11,90 (5/42)	21,74 (5/23)
Unexplained infertility	17,91 (12/67)	30,30 (12/35)
Male infertility	5,00 (1/20)	16,66 (1/6)
 Indications for ICSI procedure		
Male infertility only	12,67 (9/71)	27,27 (9/33)
Male and female infertility	11,11 (3/20)	23,07 (3/13)
Others	18,75 (3/16)	33,33 (3/9)
TOTAL (IVF and ICSI procedures)	13,31 (41/308)	25,31 (41/162)

Natural cycle

- Accurate monitoring
- Selection of patients
- Method : IVF or ICSI ?

The comparison of IVF and ICSI cycles outcome in natural cycles

	ICSI cycles	IVF cycles	P
Number	135	151	
Oocyte recovery rate	80.1 (105/135)	77.5 (117/151)	NS
Normal fertilization rate (2PN)	63.8 (67/105)	65.8 (77/117)	NS
Pregnancy rate per embryo transfer	25.4 (17/67)	23.4 (18/77)	NS
Pregnancy rate per oocyte recovery	12.6 (17/135)	11.9 (18/151)	NS

Reljic M., et al. Monduzzi Editore, IFFS 2001.

Results of Intracytoplasmic Sperm Injection of Single Oocyte in 362 Unstimulated Cycles

Veljko Vlašavljević,^{1,2} Borut Kovačič,¹ Milan Reljić,¹ Vida Gavrić Lovrec,¹ and Mojca Čížek Sajko¹

Cycles	362
Positive OPU (%)	84.6 (269/318)
Fertilization (%)	68.8 (185/269)
Pregnancy per cycle (%)	10.2 (37/362)
Delivery per cycle (%)	6.9 (25/362)
Pregnancy rate per OPU , age > 36	4.8 (5/105)
Pregnancy per OPU, age < 36	9.4 (20/213)

Conclusions: Unstimulated cycles monitored by serum estradiol, urinary LH, and ultrasound can produce an acceptable pregnancy rate after ICSI procedure only in patients younger than 36.

Natural cycle

- Accurate monitoring
- Selection of patients
- Method : IVF or ICSI ?
- Embryotransfer: day 2 or day 5 ?

Is there any benefit from the culture of a single oocyte to a blastocyst-stage embryo in unstimulated cycles?

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	ET on day 2 (204)	ET on day 5 (187)	p-value
Oocyte recovery rate	79.4 (162/204)	82.3 (154/187)	NS
Fertilization rate	73.8 (113/153)	77.7 (115/148)	NS
ET rate per aspiration	51.5 (105/204)	29.4 (55/187)	<0.05
Pregnancy rate per ET	23.8 (25/105)	40.0 (22/55)	<0.05
PR calculated /day 2 ET	23.8 (25/105)	22.2 (22/99)	NS
PR/ aspirated oocyte	15.4 (25/162)	14.3 (22/154)	NS

Natural cycle

- Accurate monitoring
- Selection of patients
- Method : IVF or ICSI ?
- Embryotransfer : day 2 or day 5 ?
- **Influence of patient's age**

Prevalence of numerical chromosomal anomalies in unstimulated cycle IVF embryos

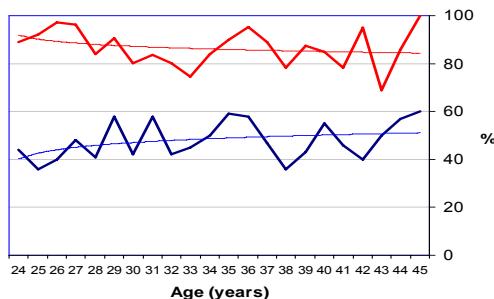
Verpoest et al. Hum Reprod 2008;23:2369-71.

- PGS in 30 cycles
- Chromosomes X,Y,13,16,18,21,22
- Aneuploid embryos : 4/11 (36.4%; 95%CI : 10.9-69.2%)

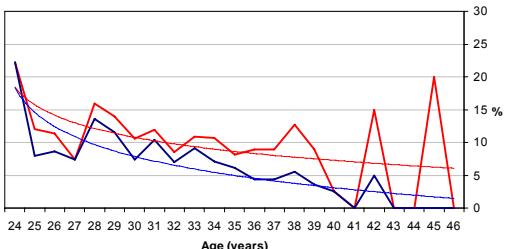


Positive oocyte pick-up rate (red) and embryo transfer rate per OPU (blue) in 1024 natural cycles for IVF/ICSI (Maribor IVF)

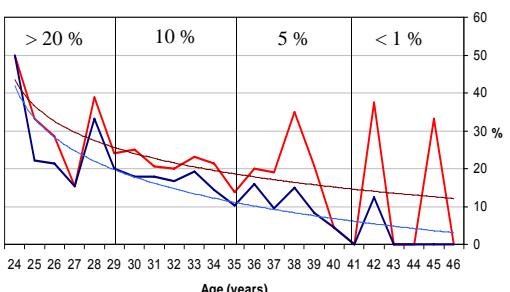
Vlašavljević V. RBM Online 2007



Pregnancy rate and delivery rate per oocyte pick-up in 1024 natural cycles for IVF/ICSI (Maribor IVF)



Influence of patients age on pregnancy rate (RED) and delivery rate (BLUE) per embryo transfer in 1024 natural IVF/ICSI cycles (Maribor IVF)



Natural cycle

- Accurate monitoring
- Selection of patients
- Method : IVF or ICSI ?
- Embryotransfer : day 2 or day 5 ?
- Influence of patient's age
- **Luteal supplementation**

Luteal phase support

It is not clear whether luteal phase support is necessary in natural cycles.

Luteal support was given after embryotransfer :
(Faulot et al.,1992 ; Paulson et al.,1992 ; Claman et al.,1993 ; Abdulghar et al.,1995 ;
Daya et al.,1995 ; Kim et al.,1996 ; Tomažević et al.,1996 ; Zayed et al.,1997; Basil
et al.,1999; Ng et al.,2001)

535 ET 14.8% pregnancy rate

No luteal support was given after embryotransfer :
Jahnssens et al.,2000; Ingerslev et al.,2001

70 ET 17.1 % pregnancy rate

Luteal supplementation

Didrogesteron (Dabroston 30 mg, Duphar):

96 embryos 12 (13.0%) implantations
 8 (8.0 %) deliveries

hCG (1500 IU, Pregnyl, Organon) on day 3 and day 7:

158 embryos 37 (23.0%) implantations
 25 (16.0 %) deliveries

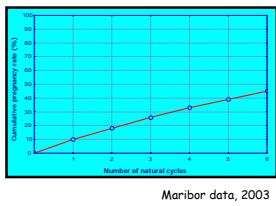
Vlaisavljević et al., J Reprod Med 2001;46:892-8.

Natural cycle

- Accurate monitoring
- Selection of patients
- Method : IVF or ICSI ?
- Embryotransfer : day 2 or day 5 ?
- Influence of patient's age
- Luteal supplementation
- **Efficacy ?**

Cumulative pregnancy rate in natural IVF cycles

- After 3 cycles : 43.0 %
Paulson et al. 1992
- After 5 cycles : 41.7 %
Aboulghar et al. 1995
- After 4 cycles 46.0 %
Nargund et al. 2001
- Probability of live birth after 4 cycles : 32.0 %
Nargund et al. 2001
- Modified natural cycle IVF in 9 cycles : 51.5%
Pelinck et al. 2008



Maribor data, 2003

Conclusions I

- Satisfactory results are obtained with the natural IVF/ICSI cycles regardless of the cause of infertility and day of embryo transfer.
- A higher pregnancy rate is expected with closer cycle monitoring and proper timing for hCG administration in women under 38 years.

Conclusions II

- Satisfactory results are obtained with the natural IVF/ICSI cycles independent from the cause of infertility and day of embryo transfer.
- A higher pregnancy rate is expected with closer cycle monitoring and proper timing for hCG application in women below the age of 38 years.

Conclusions III

- The cumulative pregnancy rate in 3-4 natural cycles is comparable with the pregnancy rate in selective one embryo transfer in stimulated IVF/ICSI cycle in a selected group of patients.
- The natural cycle is an option for patients where only one or two oocytes are obtained in a stimulated cycle (poor responders).

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