



EMBARGOED UNTIL 0.01AM FRIDAY 2ND MARCH

NEW STUDY CALLS FOR A RADICAL CHANGE IN IVF TREATMENT APPROACH

Summary of study:

More natural in-vitro fertilisation (IVF) can achieve the same chance of a pregnancy resulting in term livebirth as standard IVF, but can also reduce patients' discomfort, multiple pregnancies, and costs, according to an Article published in this week's issue of The Lancet.

A study published today in the Lancet **points** the way for a radical change in how we continue to offer IVF treatment. The research study carried out by Prof. Fauser and colleagues (*University Medical Center, Utrecht, Netherlands*) randomised 404 infertile women into 2 groups. One group had mild stimulation of the ovaries during a natural menstrual cycle and had only one embryo transferred. The other group had standard higher stimulation of the ovaries after **initial ovarian** suppression and 2 embryos transferred. There was no difference in the live birth rate when the two treatment regimes were compared over 1 year of treatment. However the mild stimulation treatment was one quarter less expensive and had a 26 times lower incidence of multiple births. Dr Geeta Nargund, President of the International Society of Minimally Assisted Reproduction (ISMAR) and the Chief Executive of Health Education Research (HER) Trust, believes this is the most convincing study to date to support the claim that mild stimulation IVF with single embryo is as effective as standard stimulation IVF two embryos.

Dr Geeta Nargund who speaks for women's health and safety and affordable IVF say's "This is a clear indication that it is time to review how we practice and fund IVF here in the UK. This important study has identified that mild stimulation IVF can achieve impressive results as 43% of these women went ahead to deliver a baby at term following a maximum of one year of treatment." **Dr Nargund** continues, "This study is a turning point as the mild stimulation group only received one embryo, not two and still achieved similar results to the standard stimulation group who were implanted with two embryos, so it undermines the necessity to transfer more than one embryo as this increases the risks to women associated with multiple births such as miscarriage and premature delivery, stillbirth and caesarean section and extremely high cost."

High stimulation IVF comes with a number of documented risks such as ovarian hyperstimulation syndrome which affects 6-10% of patients and can have serious health risks. Recent research has also highlighted that eggs and embryos in standard stimulation IVF can have more chromosome abnormalities and the lining of the womb may be less receptive to the embryo due to the high levels of steroid hormones. Besides these risks, standard stimulation IVF is expensive and for many women involves time off work. Dr Nargund says "Drugs cost a great deal of money and using fewer drugs means we would be able to carry out more cycles of IVF on the NHS and therefore could offer more treatment cycles. It will also reduce the health risks to women and their offspring and therefore provides an all round solution. It is time the Government recognised the benefits of mild stimulation IVF to women, children, families and the state and insist that such an approach be adopted as part of funding IVF within the NHS." Prof Fauser's paper showed that those undergoing mild stimulation IVF needed on average 1.8 (with a maximum of 4) cycles of IVF whereas those undergoing conventional stimulation received on average 1.5 (with a maximum of 3) cycles but one of the key benefits of mild stimulation means you do not have to wait a length of time before beginning another cycle.

In the UK the average success rate of IVF is around 25% for women aged under 38 yrs of age and can cost anything from £3,000 per cycle **upwards** and this study proved that by using mild stimulation and still achieving excellent results the costs and the health risks can be significantly reduced allowing IVF to become safer, affordable and more natural.

Prof Fauser who is the lead author of this paper states that "It is time to look at IVF more from the perspective of the patient and the future health of the child, rather than aiming for being on the top of the IVF league tables with maximizing pregnancy rates per cycle at all cost."

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Notes to editors:

- Professor Fauser is also available for interviews as a member of ISMAR and can be contacted via Mars Webb PR as above.
- Dr Geeta Nargund is available for quotes and available to summarise the studies findings. Please contact her via Mars Webb PR as above
- Visit www.hertrust.org
- Visit www.naturalcycle.org