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## **Affordable ART and mild stimulation strategies at Tygerberg Hospital Fertility Clinic: A retrospective analysis of outcomes**

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### **INTRODUCTION:**

ART (Assisted Reproductive Techniques) is an expensive option for couples suffering from infertility. The techniques are expensive due to stimulation medication costs, laboratory costs (equipment used) and clinic costs. Society is in need of lower cost ART initiatives to make it more accessible for everyone. Since ovarian stimulation is one of the most expensive components of ART, mild ovarian stimulation protocols can be a possible solution of lowering ART costs and minimizing risks for patients.

### **AIM:**

To determine whether a low cost; mild stimulation Assisted Reproductive Techniques (ART) program can be implemented effectively with acceptable clinical pregnancy rates [CPR] and live birth outcomes: a Retrospective Cohort Study.

### **MATERIALS AND METHODS:**

Retrospective data analysis on all In-Vitro Fertilization (IVF) and Intra-cytoplasmic Sperm Injection (ICSI) ART "mild stimulation" treatment cycle outcomes (2009 to 2014). Standard mild stimulation ART treatment [clomiphene citrate (Chlomid®)/Menopur®] was performed followed with standard, routine IVF and ICSI fertilization, embryo culture, embryo evaluation and uterine transfer methods. Laboratory changes during the timespan were also noted. Clinical pregnancy (CP) [foetal heart at 7 week sonography] per transfer was rendered a successful outcome.

### **RESULTS:**

Tubal Factor was the most common incidence of female diagnosis for patients undergoing IVF (59.89%) and idiopathic infertility for patients undergoing ICSI (55.70%). The overall CPR per Embryo Transfer [ET] was 23.55% (53/225). The CP for IVF patients was lower compared to ICSI patients in patient groups ≤35 years (17.02% [8/47] vs. 32.83%[21/67]) and >35 years (16.39%[10/61] vs. 22.00%[11/50]) respectively. The CPR per embryo transfer cycle where more than one embryo was transferred showed an overall increase (19.23% vs. 24.59%).

### **CONCLUSION/DISCUSSION:**

Mild stimulation ART and lower laboratory costs can be implemented effectively with acceptable clinical pregnancy rates.