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MEDICAL UPDATE

Talking to Your Patients about Uterine Factor Infertility

Uterine factor infertility (UFI) affects about **3-5% of the population** and is a primary cause of infertility in women. It is also associated with an increase in miscarriage and pre-term delivery rates and can be classified into two categories: **congenital and acquired anomalies**. Many types of malformations do not present symptoms and some do not affect a person's ability to get pregnant.

Generally, UFI is not something that doctors look for unless there is reason, such as a **lack of menstruation, heavy periods, lower back pain, dyspareunia, pre-term deliveries, or repeated miscarriages.** For the segment of the population who have experienced repeated miscarriages, for instance, the estimate of occurrence is 13%*.

Because it remains a difficult area to study, physicians must evaluate on a case-by-case basis before determining whether treatment via surgery and/or assisted reproductive technology will be effective treatments. The good news is that many uterine factors are treatable and don't impede conception or maintaining a healthy pregnancy.

*Amesse, Medscape, Apr 2018.

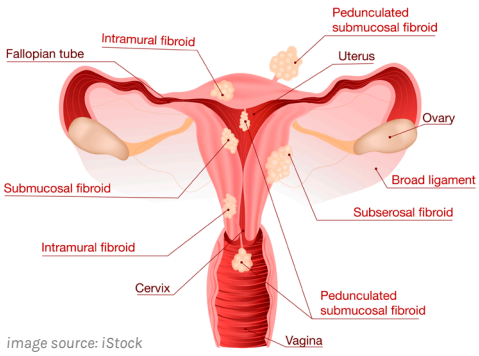

image source: iStock

Uterine Fibroids

Fibroids, also known as leiomyomas or myomas, are benign growths that can occur in the muscle of the uterus. Fibroids that enter the uterine cavity significantly decrease implantation. Intramural fibroids may lower implantation to a lower degree depending on size and displacement of the endometrium. Subserosal fibroids usually do not have an impact on implantation.

Patients with Endometriosis Now Have Even Playing Field in Pregnancy Outcomes

Approximately 40% of infertile women encounter endometriosis, which can affect the uterus by disturbing endometrial transformations occurring during the luteal phase of natural or stimulated cycles.

SGF recently participated in a retrospective cohort analysis finding that pregnancy rates are similar for endometriosis vs. non-endometriosis patients undergoing IVF with genetically screened normal embryos.

The study's findings showed primary outcomes of live birth did not differ between endometriosis patients when compared with either control group. Patients with endometriosis had a live birth rate (61%) not significantly different compared with patients in treatment for male factor infertility (49.6%) and patients undergoing PGT-M (52.1%).

These normal rates confirm that assisted reproductive technology (ART) is the treatment of choice for infertility due to endometriosis.

Bishop, et al, Fertility and Sterility, Oct 2020.

Uterine Factors Affecting Infertility	Prevalence	Treatment	Diagnostic Testing
Congenital Anomalies Septate Uterus Unicornuate, Bicornuate, or Uterus Didelphys	3-13% of infertile population	Surgery is effective in the majority of septate anomalies and women can typically resume trying to conceive shortly after surgery. Unicornuate, bicornuate, and uterus didelphys anomalies are not typically treatable and may require a gestational carrier.	Transvaginal ultrasound Saline-infused Sonohysterography (SIS) Hysterosalpingogram (HSG) Hysteroscopy MRI
Acquired Anomalies Polyps Fibroids Adenomyosis Asherman Syndrome Endometriosis	Up to 40% of women of reproductive age	In many cases, polyps and fibroids do not interfere with fertility and do not require correction. Surgical removal is very effective, however, in cases where fertility is impaired, and hysteroscopy can also be effective in select situations.	

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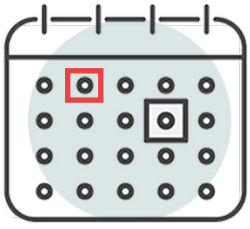
Endometrial Receptivity Array (ERA) Testing Offers Hope for Uterine Factor Infertility

SGF has conducted and is awaiting results on the largest randomized study on Endometrial Receptivity Array Testing (ERA).

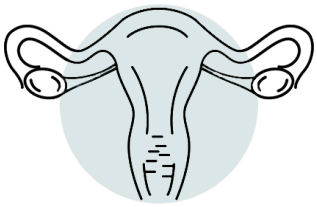
Evidence suggests that each woman may have a personal window of implantation due to alterations in the receptivity of the uterus. Reproductive endocrinologists may offer ERA testing to patients to help assess the best time to transfer an embryo in order to increase the odds of the embryo implanting to the uterine wall.

As a pioneer in research, SGF's inclusion into this study can guide and improve overall clinical practice, and will continue to improve pregnancy outcomes in women undergoing IVF.

Oral Presentation, Clemente-Ciscar, ESRHE 2018, Oct 2020.



3 in every 10 women have a displaced window of implantation.



Even the best embryo will **fail to implant** if conditions aren't right.

FIND OUT MORE ABOUT HOW UTERINE FACTORS AFFECT FERTILITY