## Effect of Unilateral Unoperated Ovarian Endometrioma on Responsiveness to Hyperstimulation

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**Abstract :** Introduction: The effects of ovarian endometrioma on fertility outcomes with IVF have been always related to poor outcomes. Objective: To evaluate the effect of unilateral unoperated ovarian endometrioma < 2cm on the number of developing follicles and compare them with the contralateral ovary as a control. Design: Retrospective case control study. Setting: KasrEl-Aini IVF center. Patient(s): We studied 32 women with unilateral endometrioma who underwent their first IVF cycle. Methods: 32 Patients aged between 20-35 years selected for IVF who were diagnosed with one unilateral endometrioma (diameter <2 cm) and who did not undergo previous ovarian surgery were retrospectively identified. The number of follicles > 17 mm during folliculometry on the day of HCG trigger in the ovary that contained endometrioma were compared with those from the contralateral ovary. They were all hyperstimulated using long protocol with (225-300 IU) gonadotrophins. Primary outcome: The number of follicles > 17 mm during folliculometry on the day of HCG trigger in the ovary that contained endometrioma (4.4  $\pm$ 2.5) and in the number of follicles > 17 mm on the day of HCG trigger in the ovary that contained endometrioma (4.4  $\pm$ 2.5) and in the opposite ovary (4.5  $\pm$  2.8) (P= 0.48). Conclusion: The presence of ovarian endometrioma in a controlled ovarian hyperstimulation cycle for IVF treatment is not associated with a reduced number of follicles > 17 mm during folliculometry on the day of HCG trigger.

Keywords : endometrioma, folliculometry, hyperstimulation, fertility

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