

New strategy could reduce twin rate after IVF

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A strategy to encourage single embryo transfer after in vitro fertilisation (IVF) could be an important tool to prevent multiple pregnancies and their associated complications, finds a study published in the British Medical Journal today.

Deciding how many embryos should be transferred after IVF is a complex problem. The transfer of only one embryo will prevent a multiple pregnancy and the risk of complications for mother and baby, but could require more cycles to achieve pregnancy.

Although professionals and policy makers have launched initiatives to encourage the use of single embryo transfer, in 2004 it was used in only 19% of in vitro fertilisation cycles in Europe. The effect of patient empowerment on decision making is also still being debated.

So a team of researchers in the Netherlands set out to evaluate the effects of a multifaceted patient empowerment strategy aimed at helping couples decide how many embryos should be transferred after IVF.

The study involved 308 couples on the waiting list for a first IVF cycle at five clinics in the Netherlands. Couples were randomly selected to receive either the intervention strategy or standard IVF care.

The strategy consisted of a decision aid, support from an IVF nurse, and the offer of an extra IVF cycle if single embryo transfer was unsuccessful.

The results show that, after the first IVF cycle, 43% of couples in the intervention group chose single embryo transfer compared with 32% in the control group. After the second IVF cycle, single embryo transfer was used by 26% of couples in the intervention group compared with 16% in the control group.

Neither of these findings were statistically significant, which means that the results could be simply down to chance. And there were no differences between the couples' levels of anxiety or depression compared with those receiving standard care. However, couples receiving the strategy had significantly higher empowerment and knowledge levels.

The average savings compared with standard IVF care were €169.75 (£146.77; \$219.12) per couple. If these savings were extrapolated to the Dutch national level, with 7,500 new couples per year, this reduction would add up to €1,273,125 annually, say the authors.

It seems that patients are willing and able to make complex decisions, if they are empowered to do so, conclude the authors.

They add: "This study illustrates that a multifaceted empowerment strategy can effectively encourage the use of single [embryo transfer](#) in clinical IVF practice. The strategy increases patient knowledge and has no substantial effect on levels of anxiety or depression. The strategy reduces costs as well, and could therefore be an important tool to reduce the twin rate after in vitro fertilisation, within a setting with patient autonomy."

An accompanying editorial says that supporting patients with reliable information is key to empowerment.

Provided by British Medical Journal

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