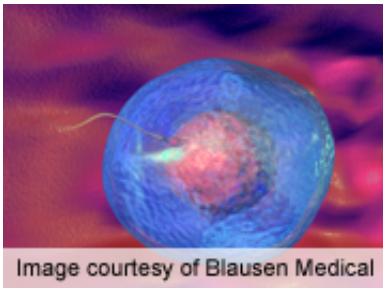


ART live-birth rates can approach natural fecundity

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During assisted reproductive technology, increasing maternal age and number of cycles is linked to lower live-birth rates with the use of autologous oocytes, but not donor oocytes, according to a study published in the June 28 issue of the *New England Journal of Medicine*.

(HealthDay) -- During assisted reproductive technology, increasing maternal age and number of cycles is linked to lower live-birth rates with the use of autologous oocytes, but not donor oocytes, according to a study published in the June 28 issue of the *New England Journal of Medicine*.

Barbara Luke, Sc.D., M.P.H., from Michigan State University in East Lansing, and colleagues estimated cumulative live-birth rates using data from cycles of assisted reproductive technology in the Society for Assisted Reproductive Technology Clinic Outcome Reporting System database for the period 2004 through 2009, linked to individual women. Conservative estimates were based on the assumption that women who

did not return for treatment would not have a live birth, while optimal estimates assumed the same live-birth rates for these women as for women continuing treatment.

Over the study period, data were available from 246,740 women with 471,208 cycles and 140,859 live births. With autologous, but not donor oocytes, the researchers found that the rates of [live births](#) decreased with increasing maternal age and increasing number of cycles. By the third cycle, using autologous oocytes, the conservative and optimal estimates of live-birth rates decreased from 63.3 and 74.6 percent, respectively, for women younger than 31 years to 18.6 and 27.8 percent, respectively, for women aged 41 or 42 years to 6.6 and 11.3 percent, respectively, for those 43 years of age or older. For women of all ages the conservative and optimal estimates of live-birth rates were higher than 60 and 80 percent, respectively, when donor [oocytes](#) were used.

"Our results indicate that live-birth rates approaching natural fecundity can be achieved by means of [assisted reproductive technology](#) when there are favorable patient and embryo characteristics," the authors write.

One author disclosed financial ties to pharmaceutical and biotechnology companies.

More information: [Full Text \(subscription or payment may be required\)](#)

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