

#### Assessment of PGT-A Outcomes According to the Indications for IVF Treatment

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### Introduction

□ Infertility: defined as the failure to achieve pregnancy after 12 months of regular unprotected sexual intercourse.

□ Approximately 85% of infertile couples have an identifiable cause.

#### **Common causes of infertility:**

• ovulatory dysfunction

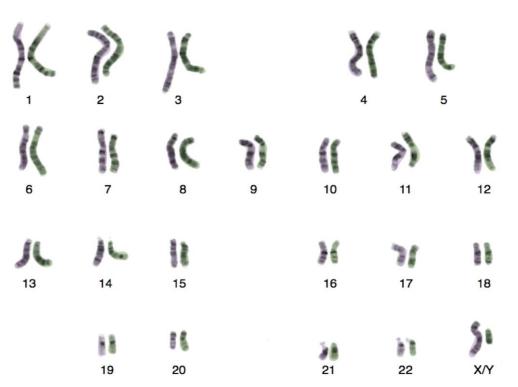
Lubal disease

□ male factor

#### Introduction

Human cells contain 23 pairs of chromosomes

- □ Aneuploidy: The presence of an abnormal number of chromosomes in the cells
- □ Aneuploidy is an important cause of miscarriages and in vitro fertilization (IVF) failure.
- Preimplantation genetic testing for aneuploidy (PGT-A) provides the opportunity to select euploid embryos for embryo transfer within IVF procedure.



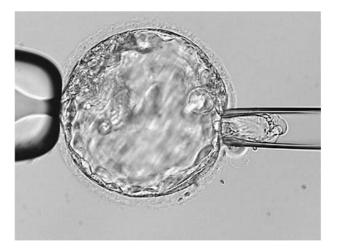
#### Importance of PGT-A

**PGT-A:** biopsy of a few cells from the developing embryo

Helps doctors select euploid embryos to transfer

Reduced miscarriage rates

Higher pregnancy rates per transfer



Randomized Controlled Trial > Fertil Steril. 2019 Dec;112(6):1071-1079.e7. doi: 10.1016/j.fertnstert.2019.07.1346. Epub 2019 Sep 21.

Preimplantation genetic testing for aneuploidy versus morphology as selection criteria for single frozen-thawed embryo transfer in good-prognosis patients: a multicenter randomized clinical trial

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Collaborators, Affiliations + expand PMID: 31551155 DOI: 10.1016/j.fertnstert.2019.07.1346 Free article

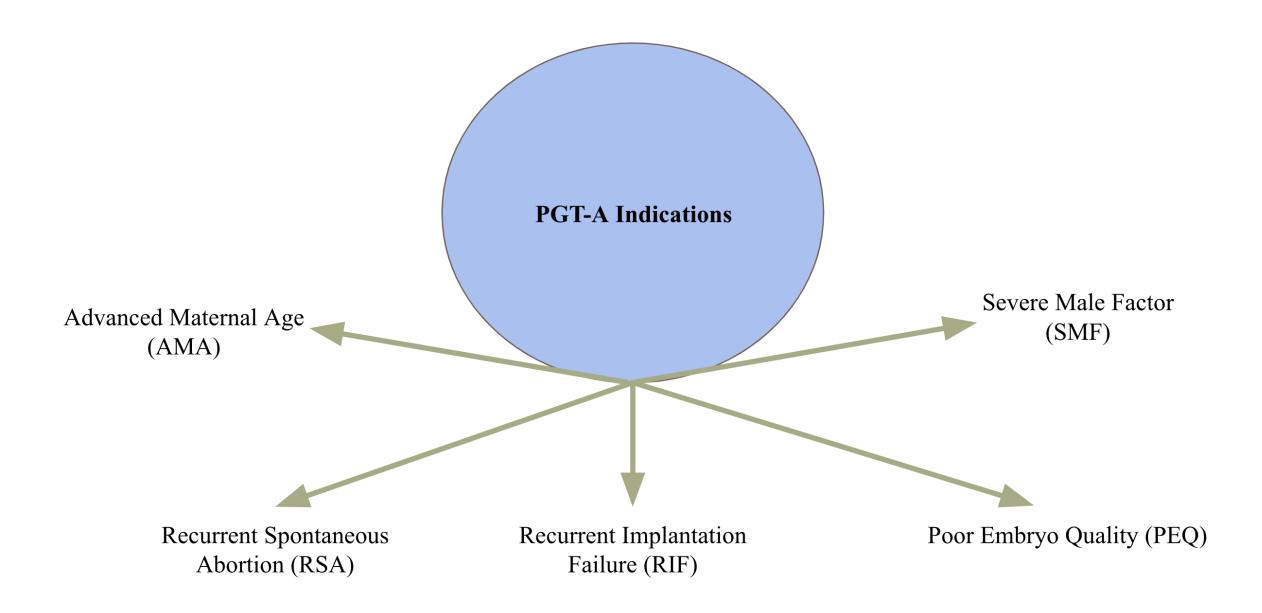
#### Abstract

Objective: To evaluate the benefit of next-generation sequencing (NGS)-based preimplantation thor. id=31551155 ing for aneuploidy (PGT-A) for embryo selection in frozen-thawed embryo transfer.

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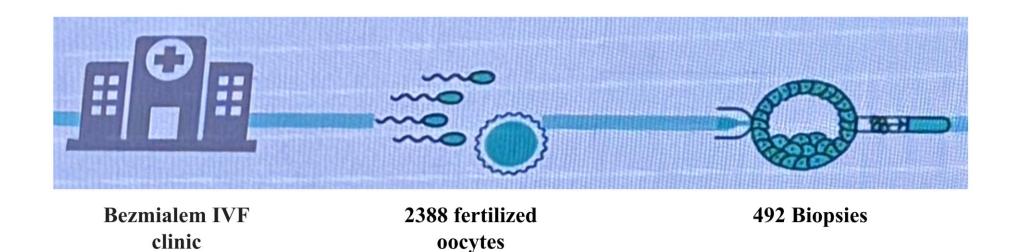
# Aim of This Study

☐ To identify optimal indications for recommendation of PGT-A in daily practice with comparison of euploid/aneuploidy ratios

To evaluate the pregnancy results of transferred euploid embryos according to PGT-A indications

	Euploid	Aneuploid	
PGT-A test result			
Number of chromosomes in each cell	Correct	Incorrect	
Likelihood of producing a healthy pregnancy	High	Very unlikely	
Recommended for transfer	Yes	No	

### Materials and Method



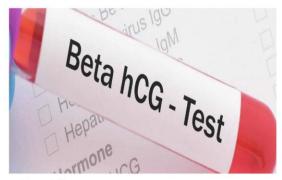
This retrospective designed single center study was carried out at IVF center of Bezmialem Vakif University

Hospital between July 2020 and May 2023.

A total of 203 women underwent IVF with PGT-A.

The results of biopsies were reported as euploid, aneuploid and chaotic.

#### Materials and Method



Positive pregnancy test (serum hCG level > 5 mIU/mL)



Miscarriage



clinical pregnancy (fetal heartbeat- 12 weeks)



Ongoing pregnancy (gestation 12-28 weeks)



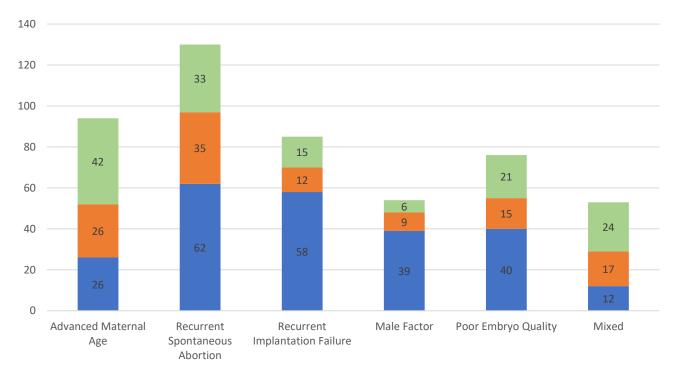
#### Results

Variables	
Female age (years)	34.47 ± 5.83 34 [20-47]
Male age (years)	36.5 ± 6.31 36 [20-59]
Previous IVF attempts	1.07 ± 1.25 1 [0-7]
Duration of infertility (years)	4.31 ± 3.08 4 [1-17]
Type of infertility Primary Secondary	97 (47.8%) 106 (52.2%)

Indication of IVF	
Tubal factor	43 (21.2%)
Male factor	15 (7.4%)
Unexplained infertility	40 (19.7%)
Ovulatory	11 (5.4%)
Endometriosis	2 (1%)
Diminished ovarian reserve	48 (23.6%)
Mixed	44 (21.7%)
Indication of PGT-A	
Advanced maternal age	47 (23.2%)
History of recurrent spontaneous abortion	41 (20.2%)
History of recurrent implantation failure	32 (15.8%)
Serious male factor	18 (8.9%)
Poor embryo quality	40 (19.7%)
Mixed	25 (12.3%)

 Table 1. Characteristics of patients

#### Results



Euploid Aneuploid Chaotic

Euploid embryo ratios were
 significantly higher in RSA, RIF, male
 factor and poor embryo quality
 compared to AMA and mixed groups.
 (p<0,001)</li>
 Most frequent chaotic embryos were
 reported in AMA and mixed group.
 (p<0,001)</li>

Figure 1. Comparison of euploid/aneuploid ratios according to PGT-A indications

#### Results

Variables	Group 1 AMA* n=21 (%)	Group 2 History of RSA* n=30 (%)	Group 3 History of RIF* n=29 (%)	Group 4 Serious male factor n=16 (%)	Group 5 Poor embryo quality n=29 (%)	Group 6 Mixed n=7 (%)	p value
BHCG positive pregnancy	12 (57.1)	24 (80)	26 (89.7)	13 (81.3)	19 (65.5)	5 (71.4)	0.106
Clinical pregnancy	8 (38.1) <sup>a</sup>	22 (73.3) <sup>a,b</sup>	26 (89.7) <sup>b</sup>	13 (81.3) <sup>a,b</sup>	15 (51.7) <sup>a</sup>	5 (71.4) <sup>a,b</sup>	<0.001
Clinical miscarriage	2 (9.5)	4 (13.3)	2 (6.9)	1 (6.3)	1 (3.4)	-	0.836
Ongoing pregnancy	6 (28.6) <sup>a</sup>	17 (56.7) <sup>a,b</sup>	23 (79.3) <sup>b</sup>	11 (68.8) <sup>a,b</sup>	14 (48.3) <sup>a</sup>	5 (71.4) <sup>a,b</sup>	0.008
Live birth	6 (28.6)	17 (56.7)	19 (65.5)	10 (62.5)	14 (48.3)	3 (42.9)	0.151

 Clinical pregnancy rate and ongoing pregnancy rate are significantly higher in patients with RIF compared to AMA and poor embryo quality.

**Table 2.** Pregnancy rates of groups euploid embryo transferred according to PGT-A indications

## **Discussion-Conclusion**

□ PGT-A is a prime example of the advancements in medical science

The effectiveness of PGT-A varies depending on the indication

Advanced maternal age is associated with lower euploidy, clinical pregnancy, ongoing pregnancy

□ PGT-A was benefical in patients with RIF and severe male factor. Patients in these groups are recommended to consider undergoing PGT-A more to avoid IVF failure .

□ However, its application should be considered based on individual patient needs and clinical situations.



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