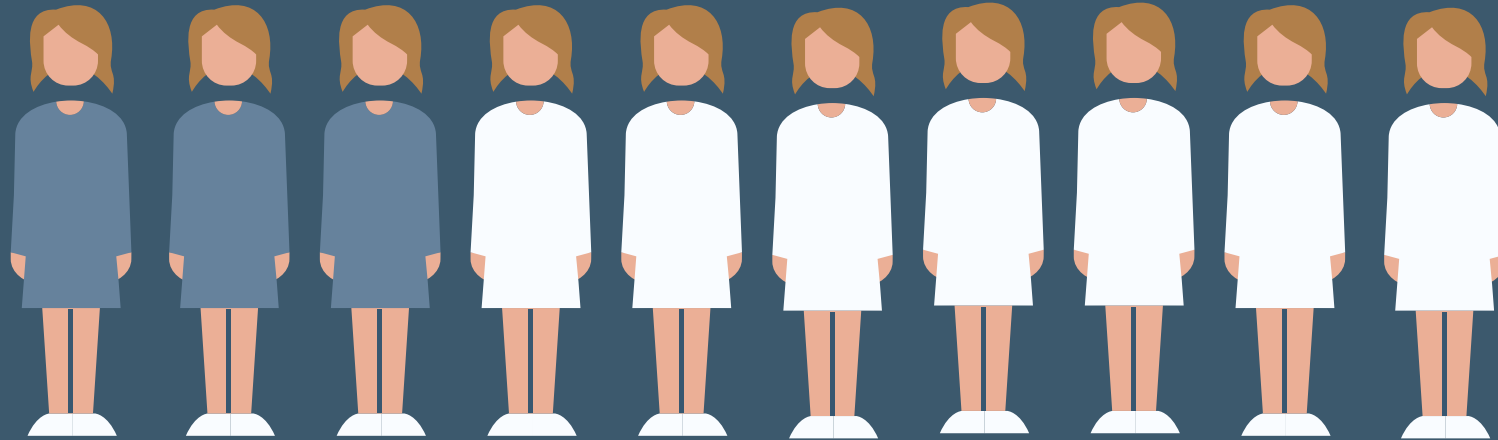


A 5-year Multicenter Randomized Controlled Trial of In Vitro Fertilization with Personalized Blastocyst Transfer versus Frozen or Fresh Transfer

(Simón C, Gómez C, Cabanillas S, Vladimirov IK, Castellón G, Giles J, Boynukalin FK, Findikli N, Bahçeci M, Ortega I, Vidal C, Funabiki M, Izquierdo A, López L, Portela S, Frantz N, Kulmann, Taguchi S, Labarta E, Colucci F, Mackens S, Santamaría X, Muñoz E, Barrera S, García-Velasco JA, Fernández-Sánchez M, Ferrando M, Ruiz M, Mol BW, Valbuena D, on behalf of the ERA RCT consortium)

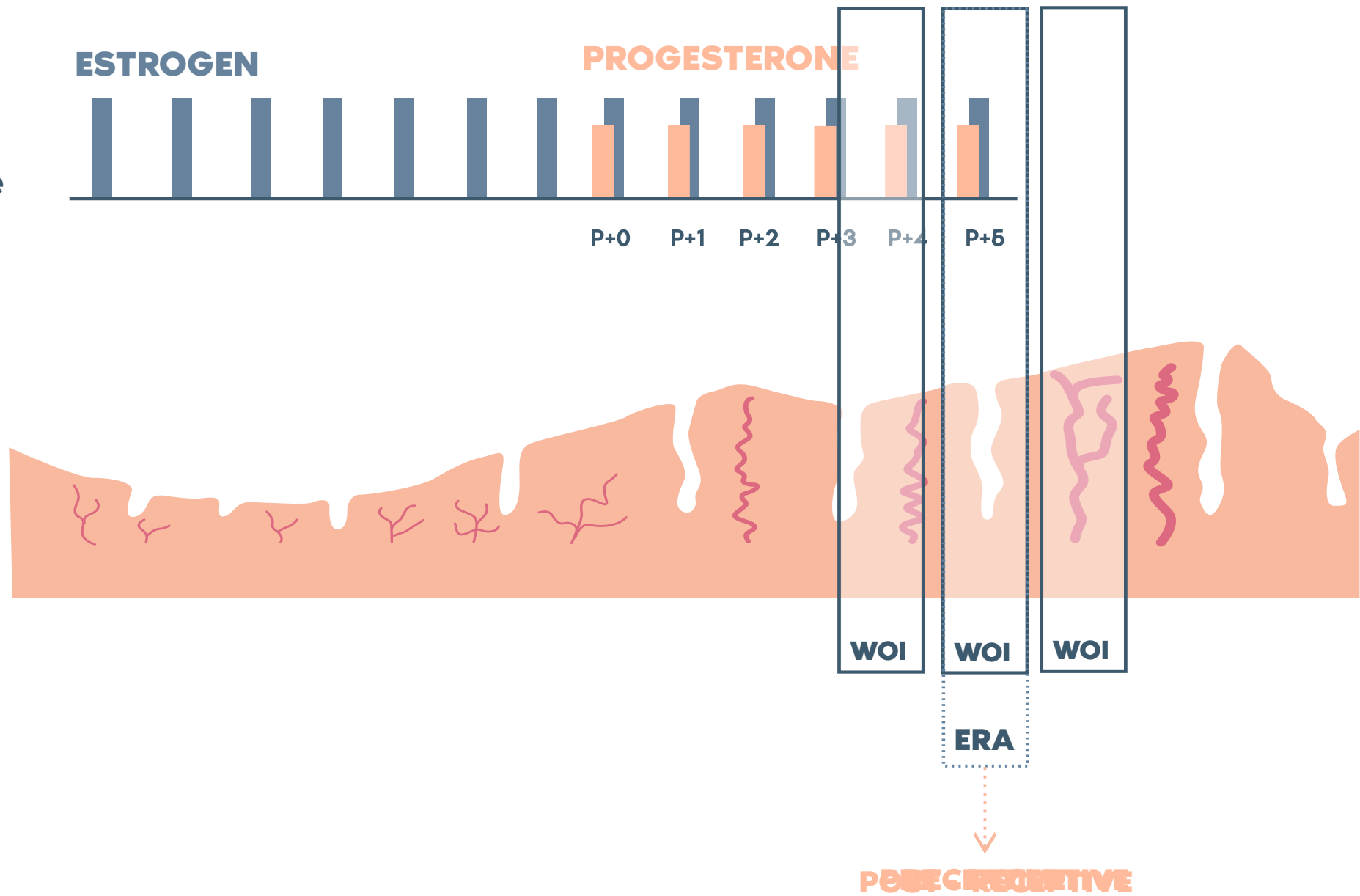
Patients often undergo multiple failures before additional investigations occur.



3 in 10 women have a displaced Window of Implantation (WOI)



HRT cycle





21 Publications



13

Igenomix

8

External



458

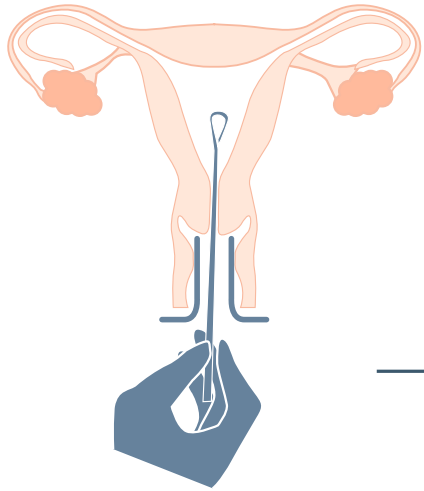


Day 5/6

pET

Personalized Embryo transfer

ERA



FET

Frozen Embryo transfer



Cryopreserved embryos

HRT



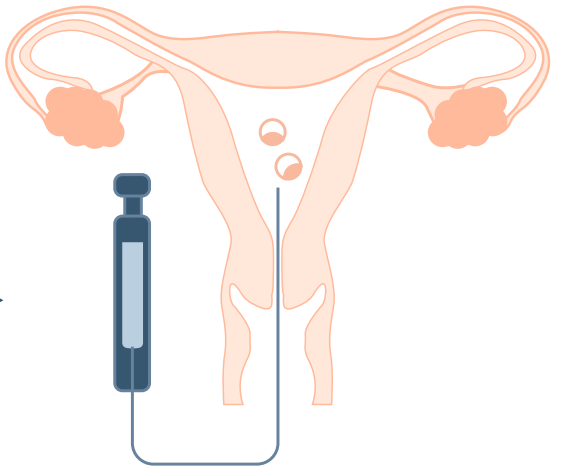
Cryopreserved embryos

HRT

ET

Fresh Embryo transfer

Transfer





Live birth rate



Cumulative LBR at one year follow up



Implantation rate



Pregnancy rate



Biochemical and clinical miscarriages



Ectopic pregnancy



Obstetrical, neonatal outcomes



Cost-effectiveness



Up to 37 years



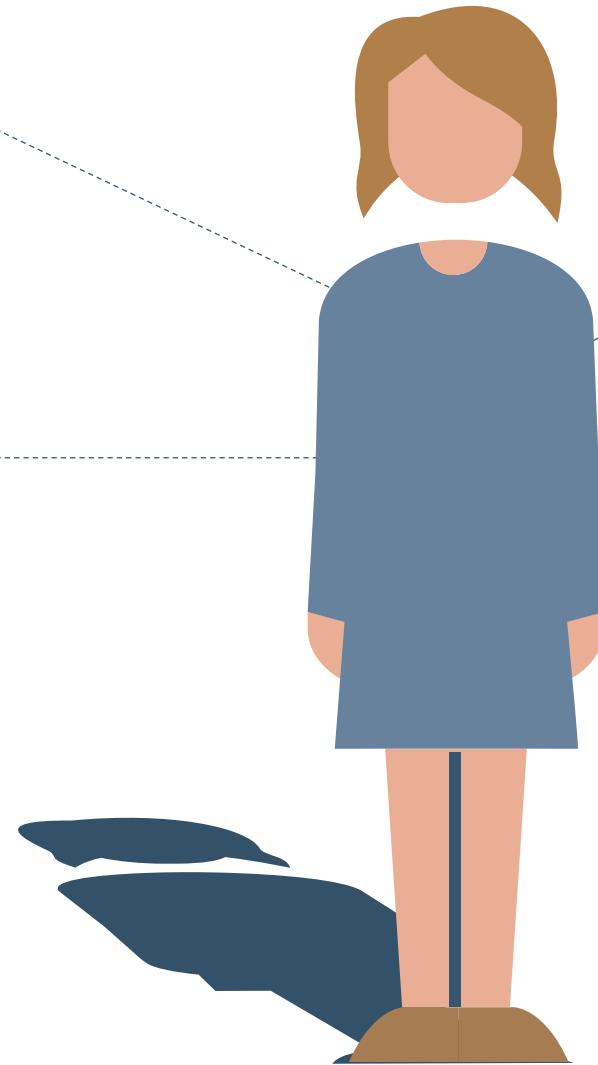
• IVF first appointment

Body mass

index: 18.5-30



• Normal ovarian reserve
(AFC \geq 8; FSH $<$ 8)





The stimulation protocol
was decided by the doctor



Blastocyst transfer
(day 5 or 6)

Exclusion criteria

- Recurrent miscarriage.
- Severe male factor (<2 million/ml).
- Implantation failure (>3 failed cycles).
- Any pathology affecting the endometrial cavity and hydrosalpinx must be previously operated.

Post-Randomization Exclusion Criteria

- P4 level $\geq 1.5\text{ng/ml}$ at the day of hCG administration in all groups.
- Absence of blastocysts for embryo transfer.
- Risk of OHSS in the fresh ET group.

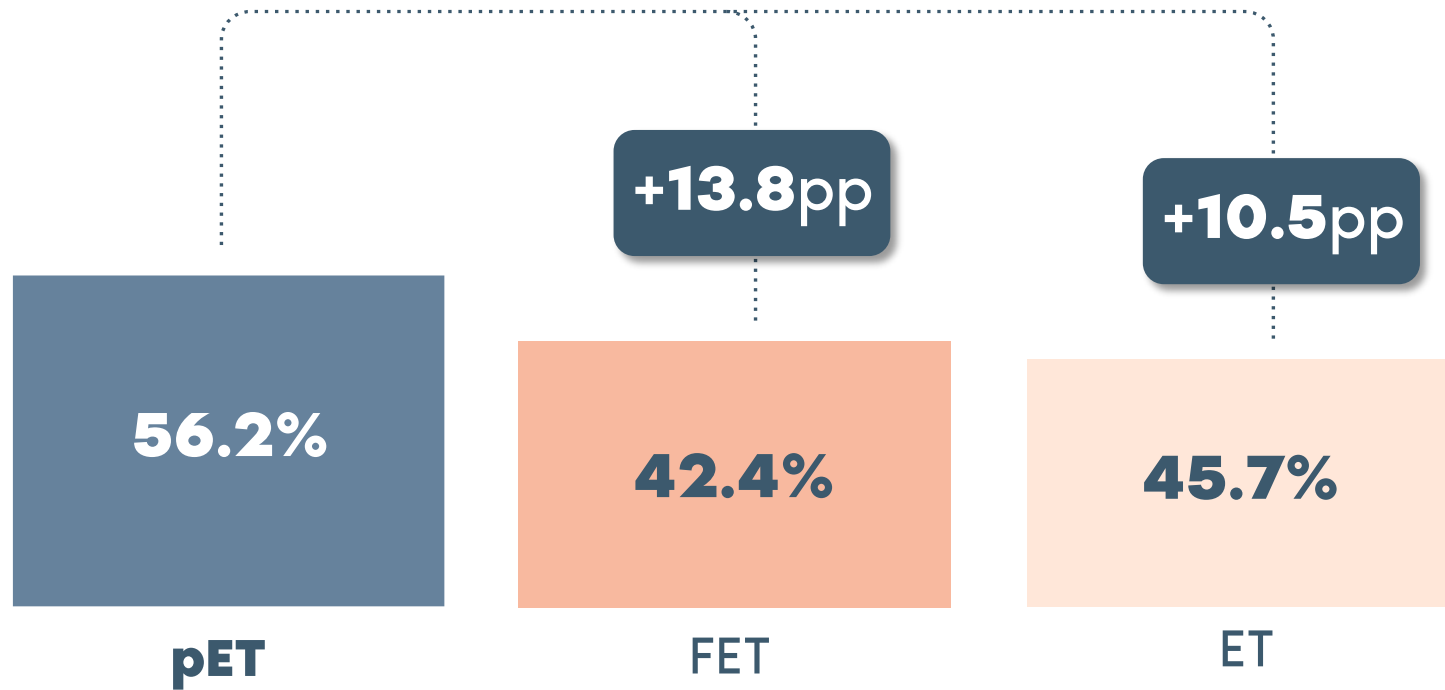
Patients using PGT-A were not excluded



Per Protocol Analysis



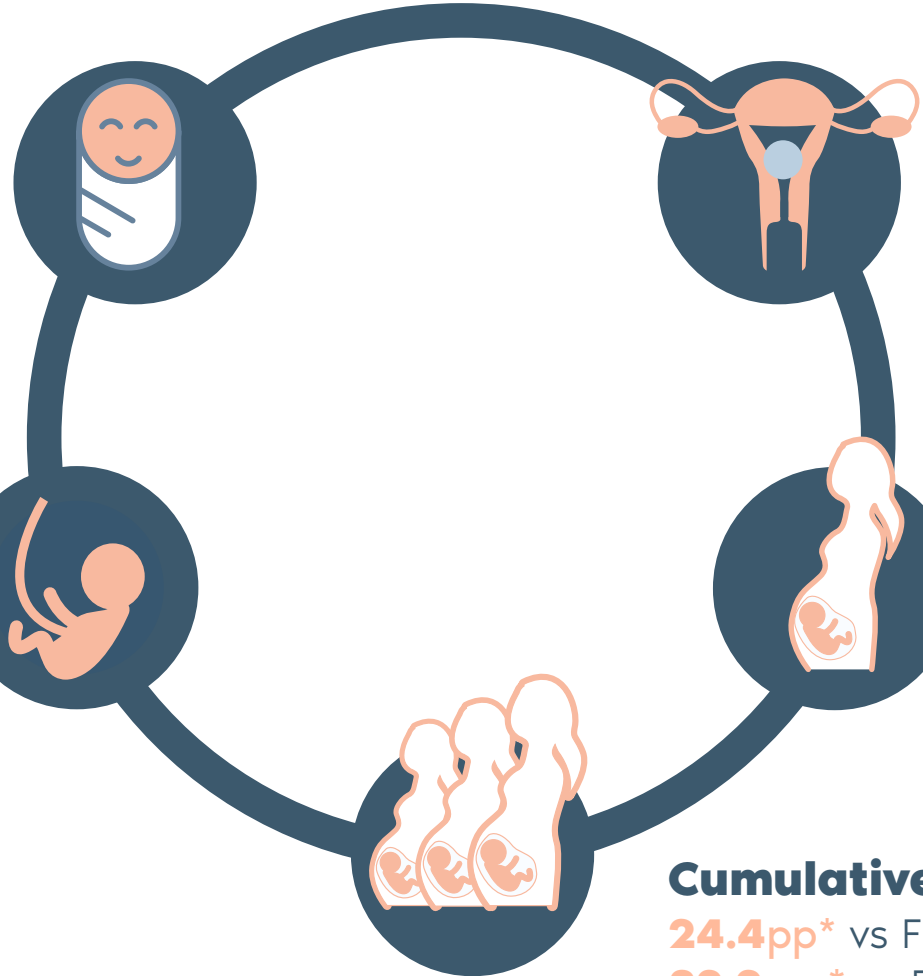
LIVE BIRTH RATE





Per Protocol Analysis

Cumulative Live Birth rate in pET increased
15.8pp* vs FET
22.3pp* versus ET



Implantation rate in pET increased
14.1pp* vs FET
18.7pp* vs ET

Live Birth rate in pET increased
13.8pp vs FET
10.5 pp vs ET

Pregnancy rate in pET increased
18.2pp* vs FET
14.3pp vs ET

Cumulative Pregnancy rate in pET increased
24.4pp* vs FET
32.2 pp* vs ET

*Statistically significant



Per Protocol Analysis

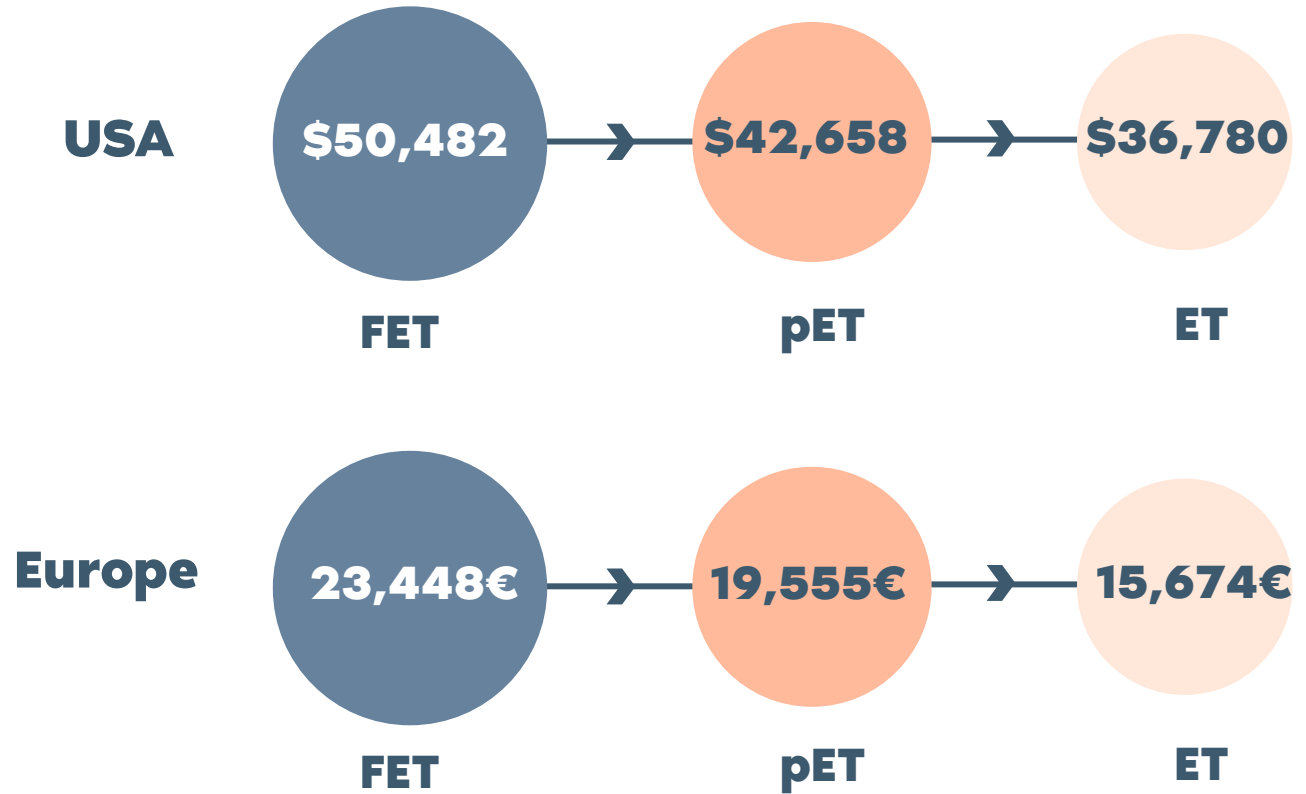


Obstetrical, delivery and neonatal outcomes were not different among pET, FET and ET



Cost-effectiveness

Estimated cost of a delivery with at least 1 LB at first attempt

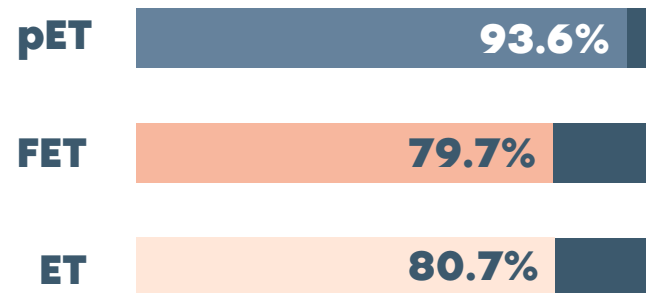




Intention to Treat Analysis



Cumulative pregnancy rate significantly increased in the pET group versus FET and ET





Live birth rate

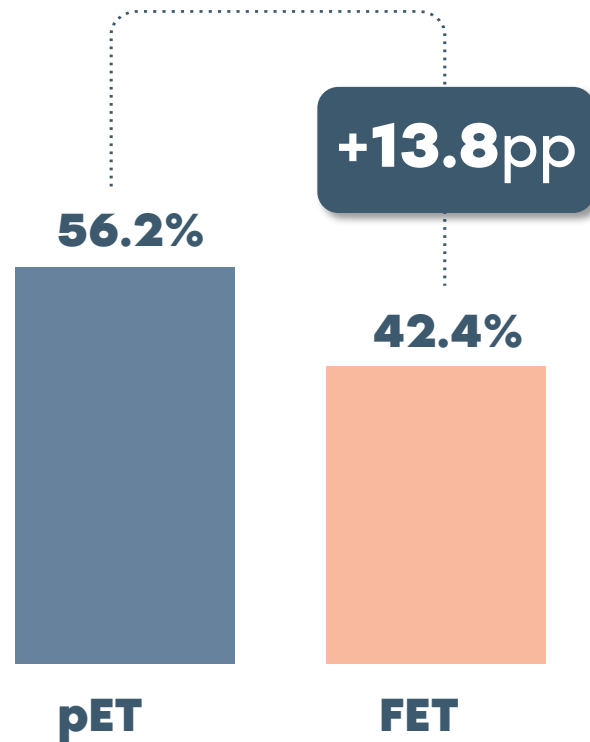
ERA maximizes the chances of pregnancy

Our study confirms that a personalized embryo transfer is superior to the conventional frozen embryo transfer.

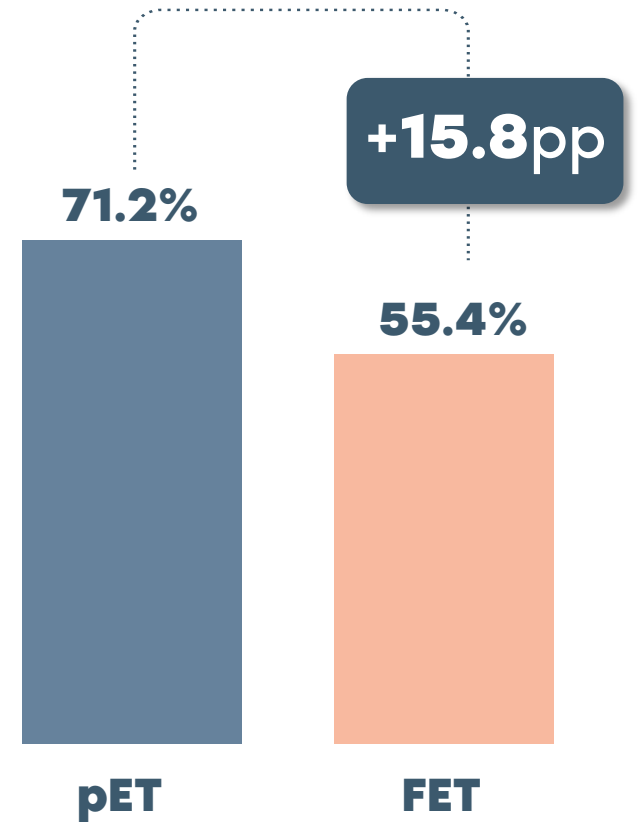
71%

Of women gave birth after **1 year**

FIRST EMBRYO TRANSFER

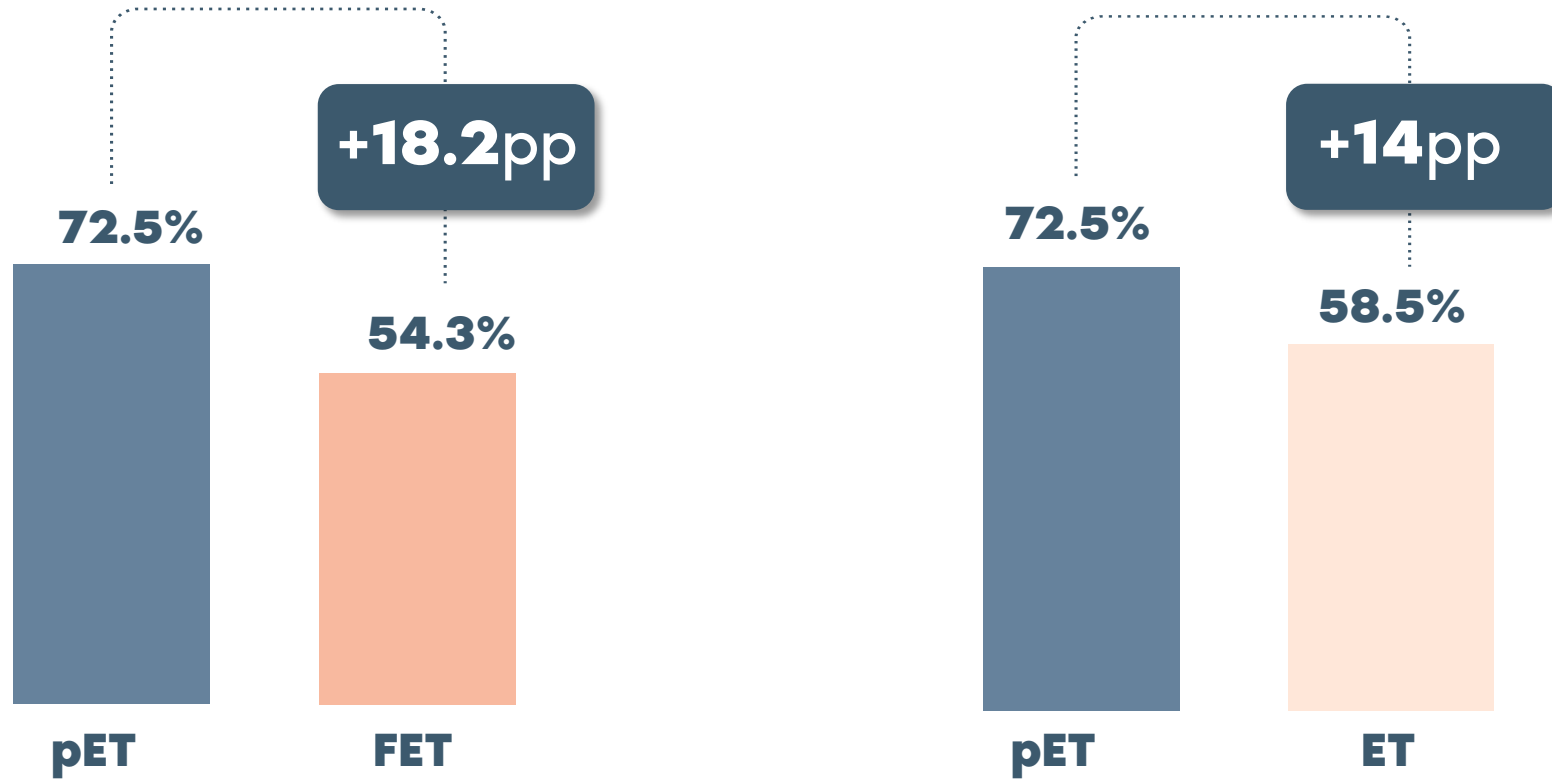
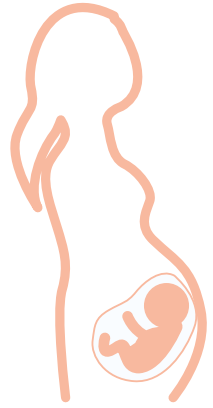


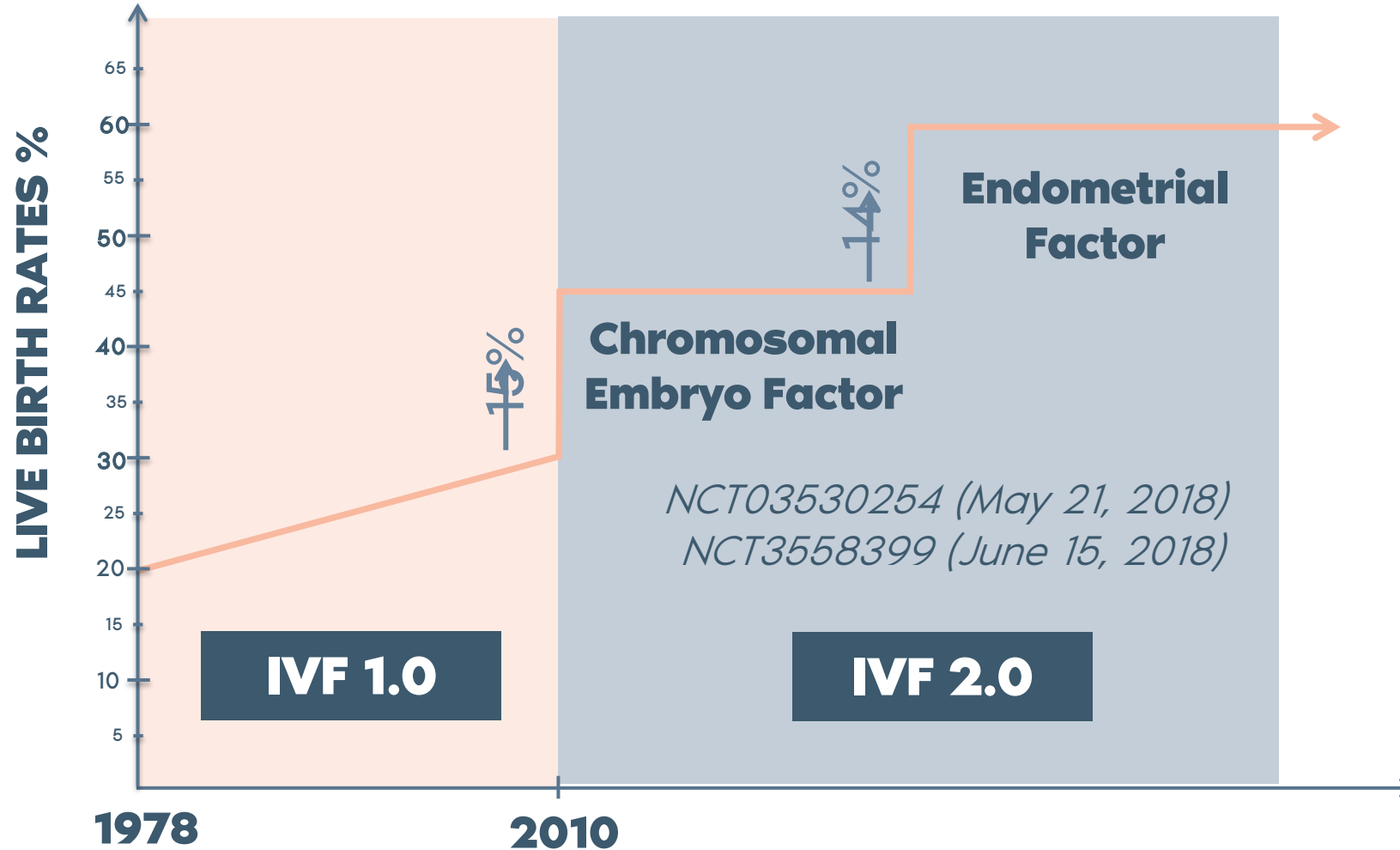
CUMULATIVE RATE





Pregnancy rate





This study shows that performing ERA in a patient's first IVF cycle significantly improves their chance of having a baby.



Igenomix[®]
WITH SCIENCE ON YOUR SIDE

