

EP04.32: Endometrial preparation with versus without ovulation for frozen embryo transfer: a systematic review and meta-analysis

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Introduction

The biological plausibility for adverse outcomes in artificial frozen embryo transfer (FET) cycles rests on the ‘corpus-luteum’ hypothesis. We aimed to compare the effectiveness and safety of endometrial-preparation methods with ovulation (maintaining a corpus luteum) vs those without ovulation (artificial cycles) for FET.

Methods

Systematic review and meta-analysis of 17 RCTs including 10,611 participants.

Results

Main results are shown on **Table 1**.

Conclusion
Our analysis directly tests the overarching corpus-luteum hypothesis and demonstrates the superiority of endometrial preparation with ovulation for maintaining early pregnancy, and potentially for improving the rate of live birth and reducing the risk of HDP in patients undergoing FET.

Table 1	Relative Risk (95% CI)	Certainty
Live birth	1.07 (0.95-1.22)	Moderate
Live birth (Excluding Outlier)	1.15 (1.01-1.31)	Moderate
Pregnancy loss	0.75 (0.65-0.86)	High
Clinical pregnancy	1.02 (0.98-1.06)	High
Hypertensive Disorders of Pregnancy	0.77 (0.55-1.07)	Moderate