

Comparative study of ovulation triggering in egg donor patients: hCG versus GnRH analogues.

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The egg donor cycles have characteristics that make it special. On one hand, we have to think about the egg recipient patient providing that the treatment is as successful as possible, with the ultimate goal of having a healthy child

at home. But we also have to take into account the donor patient, as long as the stimulation process is tolerated the best possible way by minimizing as much discomfort as possible and avoiding any adverse effects.

The aim of our study is to determine the optimal therapeutic protocol to trigger ovulation in egg donor patients that are stimulated by a protocol with GnRH antagonists.

Our results show that those cases, in which ovulation was triggered with HCG, had better fertilization rates and better quality embryos. There were no differences between groups in the number of eggs collected, and number of eggs at metaphase II. We did observe higher rates of adverse events (all mild features, without presenting any case of severe hyperstimulation syndrome) in women treated with HCG.

Therefore, we conclude that overall treatment with HCG will be preferable to the use of GnRH analogues for triggering ovulation in egg donor patient cycles with GnRH antagonists. Although, we should identify cases of women at increased risk of hyperstimulation, which would be indicated preferentially the use of GnRH analogues.