

DHEA – The Magic Drug for Poor Responders??

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INTRODUCTION

- With infertility populations in the developed world rapidly aging, treatment of diminished ovarian reserve (DOR) assumes increasing clinical importance.
- Dehydroepiandrosterone (DHEA) has been reported to improve pregnancy chances with DOR, and is now utilized by approximately one third of all IVF centers world-wide.

RESULT

- We have seen a trend of increasing AMH and AFC after at least 3 months of treatment.
- Maximum patients in our study were from the age group of 34-39 years
- AMH levels did show an improvement in about 70% cases
- We could see a better fertilization rate from the previous cycle in about 53%
- Better result were obtained only after a treatment of minimum 3 months of DHEA.
- Our study did show a slight improvement in embryo quality from previous cycle.
- AMH and AFC both showed slight improvement after 3 to 4 months of DHEA therapy

CONCLUSION

- Our findings show an improvement in AMH levels and antral follicle count in women with poor ovarian reserve which was statistically significant.
- The improvement in mean levels of AMH and AFC was more in younger age group (< 35 yrs)
- But due to small sample size , there is a need to continue this study and draw conclusions on a larger sample size

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