

# Do women regret embryo testing before IVF?

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The most effective way to increase the odds that an embryo will successfully implant during in vitro fertilization (IVF) is genetic testing to see if the embryo is normal.

But the news often isn't good. By the time a woman is 44 years old, the vast majority of her embryos will be abnormal.

A new study asked women who had their embryos tested before IVF if they were glad or regretted the procedure?

Regardless of whether they had a normal embryo or not, 94 percent of [patients](#) surveyed were glad to have the information, a new study from Northwestern Medicine and New York University Langone Fertility Center reports.

This is the first study examining the risk of regret and anxiety following screening for chromosomal abnormalities in embryos before IVF.

The paper will be published June 21 in *Human Reproduction*, a journal of the European Society of Human Reproduction and Embryology.

"The traditional practice of IVF involves transferring an embryo, with an unknown likelihood of implantation, and finding out on the other end whether it will implant or result in a [healthy pregnancy](#)," said lead study author Dr. Kara Goldman. "We discovered that even after a negative outcome, most women found the information gained from embryo testing to be valuable for reproductive planning."

Goldman is an assistant professor of obstetrics and gynecology in reproductive endocrinology and infertility at Northwestern University Feinberg School of Medicine. She also is the Northwestern Medicine director of fertility preservation.

"Older women understand their time is limited," Goldman said. "If they lose three months because of a miscarriage, that's a lot of time. Most patients like the idea of having as much information in front of them as possible, so they don't have to go through the very difficult waiting period between the embryo transfer and the [pregnancy test](#) if the embryo wouldn't have resulted in pregnancy."

In genetic testing, clinicians check to see if there are too many or too few chromosomes, which will result in a miscarriage, an embryo that won't implant or a chromosomally abnormal fetus. The latter requires the parents to decide if they want to terminate the pregnancy.

A small but significant number of patients who had abnormal results, or did not get pregnant with one of their normal embryos, did feel regret after the testing procedure.

"This study identified where we need to better help patients in terms of mental health services," Goldman said. "We need to make sure we have our psychologists and doctors supporting patients when they have abnormal embryos and are preparing to make their subsequent treatment decisions.

"The most common reason for patients to drop out of IVF treatment before they are successful is the psychological burden," Goldman said. "Genetic testing of [embryos](#) is an area where we have thousands of patients using this technology and no one has studied the psychological burden of it."

IVF is used widely among patients with infertility, and in the United States nearly 2 percent of all babies born were conceived with IVF.

The study was conducted via an anonymous internet-based survey completed by 69 patients between January 2014 and March 2015 after screening for chromosomal abnormalities. The patients were from New York University Langone Fertility Center, where Goldman was on faculty prior to joining Northwestern. The survey included three validated questionnaires including the Brehaut Decision Regret Scale, short-form State-Trait anxiety inventory and health literacy scale.

The title of the paper is "Beyond the biopsy: predictors of decision regret

and anxiety following preimplantation [genetic testing](#) for aneuploidy" by Kara N. Goldman et al.

Provided by Northwestern University

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