Not All IVFs Lead to Rome

Zhongjie Shi*

Department of Cancer Biology, Thomas Jefferson University, USA

In the history of human, infertility has always been a major medical and social concern. It has been reported that infertility affects 10-15% of the reproductive age population [1]. In this special issue of In vitro Fertilization (IVF), researchers have shared their expertise in this special field, from the advantages of popular IVF protocols, to the afterwards breastfeeding rate, and the risks of IVF concerning birth defects and cancer in children.

In his recent review, Kim [2] from Korea discussed strategies for poor responders in IVF cycles. In addition to the most prevalent protocols for treating poor responders at present, his research group found that GnRH antagonist (GnRH-a) Multiple-Dose Protocol (MDP) with oral contraceptive pill pretreatment is as effective as GnRH-a low-dose long protocol in poor responders and can be advantageous, with potential mechanisms shown in detail [2].

O’Quinn et al. [3] from Canada analyzed the relationship between exclusive breastfeeding and assisted reproductive technologies based on a cohort study. They found that mothers who conceive using ART do not differ from those who conceived spontaneously in breastfeeding initiation, duration or likelihood of difficulty, which suggests that specialized counseling for these mothers is not required in regards to breastfeeding [3].

Will the application of IVF increase the risk of birth defects and cancer in children? Ooki [4] analyzed birth defects after assisted reproductive technology in Japan [4], with the conclusion that the risk of birth defects in ART live births are not significantly different between multiples and singletons. Källén et al. [5] from Sweden investigated into the link between IVF children and cancer by summarizing characteristics of women undergoing IVF and their children which could possibly influence childhood cancer risk [5].

In summary, the road of IVF is never straightforward. The solution to low successful rate in elder women and risks of birth defects and cancers in childhood are always under debate [6]. With the fast development of techniques and protocols based on large scale trials, a personalized IVF is promising.

References

* Corresponding author: Zhongjie Shi, Department of Cancer Biology, Thomas Jefferson University, USA, E-mail: tuy43117@temple.edu

Received November 30, 2012; Accepted December 01, 2012; Published December 08, 2012

Citation: Shi Z (2012) Not All IVFs Lead to Rome. Reproductive Sys Sexual Disord S5:e001. doi:10.4172/2161-038X.S5-e001

Copyright: © 2011 Shi Z. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.