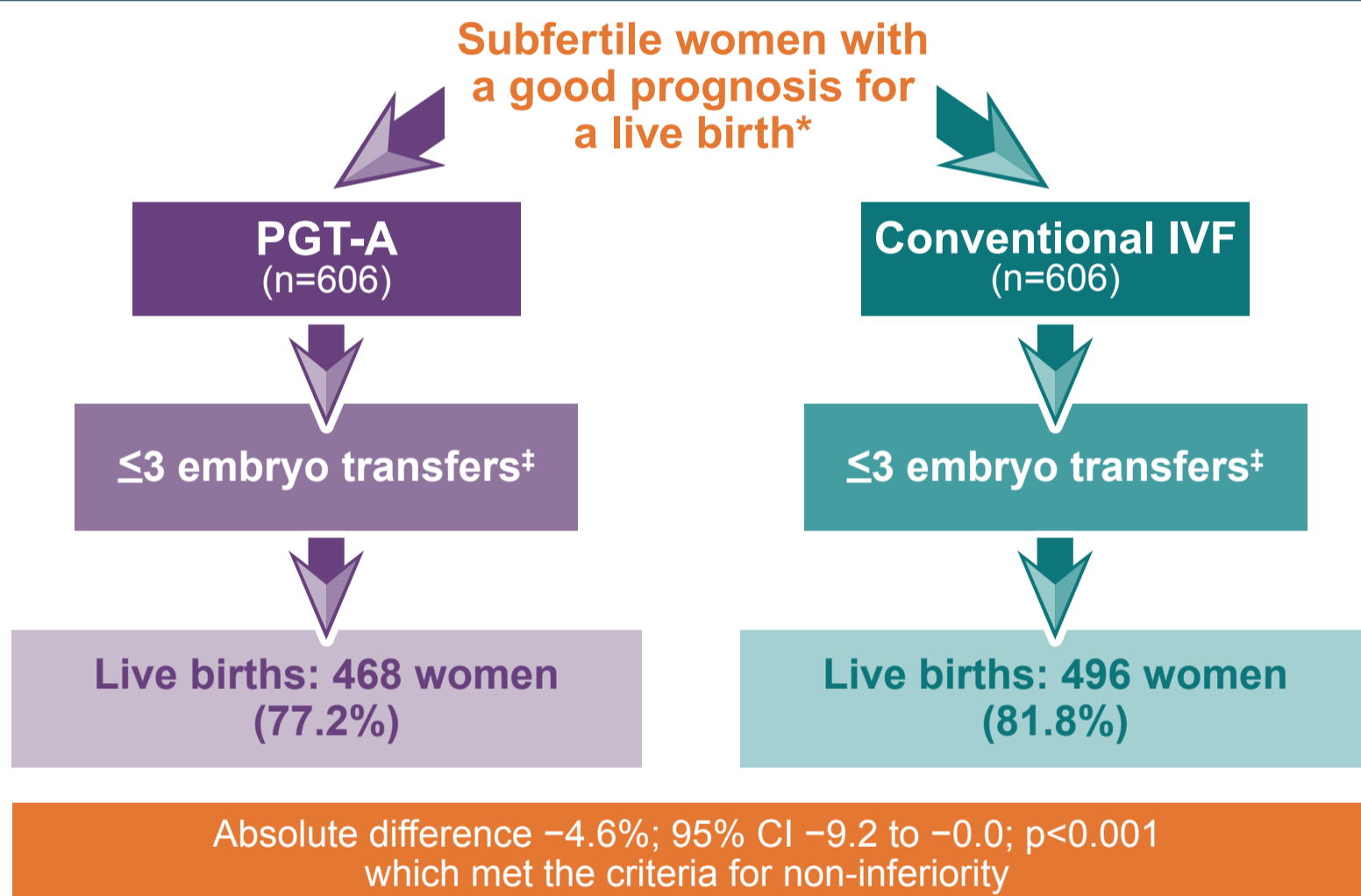




## Did you know?

...that preimplantation genetic testing for aneuploidy (PGT-A) may not necessarily improve pregnancy outcomes?

In a large, randomised, controlled trial involving 1,212 subfertile women with a good prognosis for a live birth,\* conventional *in vitro* fertilisation (IVF) resulted in a cumulative live-birth rate† that was noninferior to that with PGT-A<sup>1</sup>



**Secondary outcomes such as a good birth outcome<sup>§</sup> and obstetrical or neonatal complications were also similar in the two groups; however, frequencies of cumulative clinical pregnancy loss were lower with PGT-A**

\*aged between 20 to 37 years with ≥3 good-quality blastocysts available (good prognosis); †primary outcome; ‡performed within 1 year after randomisation; §live birth at 37 weeks or more of gestation, with a birth weight between 2,500 and 4,000 g and without a major congenital anomaly.

- The cumulative live-birth rate is considered to be an important patient-centred outcome in evaluating the success of an IVF programme<sup>1,2</sup>
- The results of this study are important as previous data on PGT-A effectiveness have focused on outcomes after the first embryo transfer<sup>1,3,4</sup>

ART, assisted reproductive technology; CI, confidence interval; IVF, *in vitro* fertilisation; PGT-A, preimplantation genetic testing for aneuploidy.

1. Yan J *et al.* *N Engl J Med.* 2021;385(22):2047–58.
2. Wilkinson J *et al.* *Hum Reprod.* 2017;32:1155–9.
3. Scott RT Jr *et al.* *Fertil Steril.* 2013;100:697–703.
4. Munné S *et al.* *Fertil Steril.* 2019;112(6):1071.e7–1079.e7.

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