

Cost influences the choice of gonadotrophins (urinary vs. recombinant) used in ART treatment in the United Kingdom.

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The basis of controlled ovarian hyperstimulation (COH) in all ART procedures has been the availability of effective and safe menopausal gonadotrophins (hMG) obtainable at a fair cost. Surprisingly, the emergence of recombinant FSH and recently LH has emphasised the strengths and effectiveness rather than weakness of hMG usage in women undergoing fertility treatment. This view has largely been due to the recognition of the importance of endogenous LH or the presence of LH in medications used in COH in recent years.

Observational studies in UK have revealed that women undergoing ART with highly purified urinary gonadotrophins have comparable results with respect to clinical outcome measures including low cancellation rates. Thus, the National Institute of Clinical Excellence (NICE) has advised that cost as well as effectiveness should be considered when choosing gonadotrophins for ART. Current UK practice will be reviewed in the light of the NICE guidelines.

