

RESEARCH ARTICLE

Curative effect of assisted reproduction technology by Traditional Chinese Medicine multi-channel interventional therapy on 95 cases of *in vitro* fertilization and embryo transfer failure

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Traditional Chinese Medicine (TCM) multi-channel interventional therapy on women with Assisted Reproductive Technology (ART) failure, to compare the curative effect of the dual therapy and triple therapy on women with ART Failure, and to choose the best TCM interventional therapeutic plan.

METHODS: The 95 cases with ART Failure from West China second University Hospital of Sichuan University meeting the inclusion criteria were randomly divided into three groups: dual therapy group (31 cases), triple therapy group (33 cases) and control group (31 cases). According to the intervene treatment of *in vitro* Fertilization and Embryo Transfer (IVF-ET) long cycle scheme, the control group wait naturally for 3 months before IVF-ET. The dual therapy group take TCM prescription II of cultivating emotion and assisting reproduction and auricular acupoint therapy for 3 months before IVF-ET, then Western Medicine treatment progestin supporting as well as auricular application and Antai Recipe after IVF-ET transplantation. The triple therapy group take TCM prescription II of cultivated emotion and assisted reproduction, auricular acupoint therapy and retention enema of TCM, and combination treatment the same as dual therapy group after transplantation. The natural pregnancy number, the period condition of secondary IVF-ET and the improvement of the kidney deficiency, liver depression and blood stasis syndrome among those three groups were compared.

RESULTS: It was showed from analysis in 95 cases with ART failure that the number of natural preg-

Abstract

OBJECTIVE: To evaluate the curative effect of Tradi-

nancy was as followings: 3 patients from the dual therapy group, 10 patients from the triple therapy group, and no patient from the control group. The comparison among three groups have statistical significance ($P < 0.05$). The treatment group is superior to the control group, while the triple therapy is superior to the dual therapy. The comparison of the condition of the fertility rate, clinical pregnancy rate, biochemical pregnancy rate and early abortion rate during the period of secondary IVF-ET between pre-therapy and post-treatment of both the dual therapy group and the triple therapy group have statistical significance ($P < 0.05$). The comparison of the improvement of the kidney deficiency, liver depression and blood stasis syndrome between pre-therapy and post-treatment of both the dual therapy group and the triple therapy group have statistical significance ($P < 0.05$). The comparison between three groups after treatment have statistical significance ($P < 0.05$).

CONCLUSION: TCM multi-channel interventional therapy can increase the natural pregnancy rate of patients with ART Failure (the triple therapy is superior to the dual therapy); it can increase the fertility rate, clinical pregnancy rate, and decrease the early abortion rate during the period of secondary IVF-ET; it can improve syndromes of kidney deficiency, liver depression and blood stasis.

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Keywords: Infertility; Fertilization *in vitro*; Embryo transfer; Kidney deficiency and blood stagnation; Stagnation of liver Qi; Medicine, Chinese Traditional

INTRODUCTION

Infertility is the absence of pregnancy after 12 months or more of regular unprotected sexual intercourse. It becomes an important public health issue for the high prevalence,¹ it has significant influence on the quality of life (QoL) of patients and the family as well as the stability of society.² It is reported that Infertility has been ranked as the third biggest disease after tumor and cardiovascular diseases so far,³ approximately 15% of all human couples are diagnosed with infertile,⁴ and nearly 11% in our country, which has a tendency to rise year by year.^{5,6}

Represented by *in vitro* fertilization and embryo transfer (IVF-ET), the rise of assisted reproductive technology, which has improved the cure rate of infertility, brought hope for the majority of infertility patients. However, by IVF-ET, it is far from achieving doc-

tor-patient satisfaction in terms of clinical pregnancy rate. It is estimated that the average clinical pregnancy rate is 40%-50%,^{7,8} There are complications, such as poor ovarian response, ovaries high reaction or even Ovarian hyper-stimulation syndrome (OHSS), high cancellation rate and abortion rate and so on. Recently, TCM multi-channel interventional therapy on IVF-ET failure cases have attracted increasing attention world widely. Our previous studies had demonstrated that the application of TCM therapies in IVF-ET could increase the endometrial thickness of patients,⁷ improve the fertilization rate and clinical pregnancy rate and decrease the early abortion rate, thus improving the success rate of IVF-ET. Based on the preliminary research, this study aims to evaluate the curative effect of TCM multi-channel interventional therapy on women with ART failure and compare the curative effect of the dual therapy and triple therapy in order to choose the best TCM interventional therapeutic plan.

MATERIALS AND METHODS

General information

Ninty-five cases with ART failure (long cycle scheme) from December 2012, to March 2014 in reproductive center of West China second University Hospital of Sichuan University, who decide to do IVF-ET (long cycle scheme) again and meet the inclusion criteria were selected. No statistical significances were found in age, BMI, menstruation, the number of pregnancy, infertility and related factors, past IVF-ET condition and TCM syndrome integral, etc. among those three groups ($P > 0.05$). This study get the ethics committee's approval, all participants know and voluntarily signed informed consent (the Teaching Hospital of Chengdu University of Traditional Chinese Medicine Central ethics review: 2013KL-022). Clinical trial has been registered.

Diagnostic criteria

Western Medicine diagnostic criteria: infertility diagnostic criteria refers to the Obstetrics and Gynecology.⁹ Infertility, defined clinically as the absence of pregnancy after 12 months or more of regular unprotected sexual intercourse.

Primary infertility is defined as no contraception or pregnancy while secondary infertility is being conceived once and then no contraception for one year.

According to the relevant content from Notice of the Ministry of Health on revision of human ART and human sperm bank related specifications, basic standards and ethical principles,¹⁰ IVF-ET indications: (a) gametes transport barriers caused by female factors; (b) ovulation obstacle; (c) endometriosis; (d) oligospermia and asthenospermia; (e) unexplained infertility; (f) immune infertility.

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