

OVERCOMING DIFFICULT EMBRYO TRANSFERS - STRATEGIES AND TECHNIQUES

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In vitro fertilization success depends on a number of factors, including the ease of embryo transfer. Studies have shown low success is often associated with difficult transfers. Also, there is a wide variation in success among clinicians even within the same program. The simplicity of the procedure has led to the perception embryo transfers requires very little training or experience.

Transfer catheters have improved over time, but the technique itself has changed little. Ultrasound is used routinely for most embryo transfers, and this has improved success in many programs. However, ultrasound only confirms the location of the catheter and is not the solution in overcoming difficult transfers. A trial transfer prior to the cycle not only helps to identify the more difficult patients, but also allows ample time to correct the problem, i.e. removing endocervical obstructions.

Difficult transfers are typically due to one of the following factors:

1. Severe endocervical stenosis,
2. Acute utero-cervical angle,
3. Unrecognized endocervical ridges, false passages, or
4. Blockage/obstructions within the endocervical canal.

This lecture will discuss how to identify difficult transfers, and focus on strategies and solutions to overcome this problem