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Ovarian responsiveness in ART after CO2 fiber laser vaporization for endometrioma treatment: preliminary data

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Abstract

Background: Data about endometrioma ablation using energies with little thermal spread reported good results in terms of ovarian reserve and postoperative pregnancy rates. The aim of the present study was to assess the impact of 'one step' CO2 fiber laser vaporization for endometrioma on subsequent controlled ovarian stimulation.

Methods: This prospective observational cohort study included a consecutive series of infertile patients who have undergone CO2 fiber laser vaporization for endometrioma treatment. The primary endpoint was to assess the number of follicles per ovary growing during controlled ovarian stimulation. The secondary endpoints included the number of oocytes retrieved, the total number of embryos obtained and the cumulative clinical pregnancy rate per patient treated.

Results: Twenty-six patients underwent assisted reproductive technology after surgery for endometriosis-related infertility. In unilateral operated ovaries at the end of controlled ovarian stimulation no significant differences emerged from comparison of total recruited follicles in the operated ovary and in the contralateral ovary ($p=0.55$). If considering only bilateral endometriomas, the number of recruited follicles at the end of controlled ovarian stimulation was similar in both operated ovaries ($p=0.79$). The number of cumulative clinical pregnancies was 15 (57.7%; 95% CI: 38.5-76.9%). When comparing women aged ≤ 35 years to those aged > 35 years, controlled ovarian stimulation outcomes were significantly higher in the younger patients. Age at the time of assisted reproductive technology was the only independent predictor for follicular growth during ovarian hyperstimulation (CI: -1.27 to -0.116, $p=0.027$).

Conclusions: CO2 laser-treated endometrioma is associated with favorable reproductive assisted reproductive technology outcomes.

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