Figure 1

n=362 patients
At high risk for OHSS on day of triggering final oocyte maturation.

n=353 patients
5000 IU hCG to trigger final oocyte maturation

n=9 patients
GnRH agonist to trigger final oocyte maturation and embryo cryopreservation.
No OHSS

Monitoring of patients post OPU

Monitoring of high-risk patients on Days 3 and 5 post oocyte retrieval for development of severe OHSS

Severe OHSS on Day 5
n=40 patients
- Administration of GnRH antagonist from D5 to D8 post OPU
- Cancellation of embryo transfer
- Cryopreservation of all embryos with the exception of one patient in whom contamination occurred in embryo culture

Monitoring of severe OHSS
Follow up on Days 7,9,11 post oocyte retrieval.
Confirmation of regression of severe OHSS.

No patients required hospitalization. Severe OHSS regressed (or was not present) in all 40 patients within the monitoring period.

No severe OHSS on D5
n=313 patients

n=303 patients:
Proceeded to embryo transfer:
Positive hCG test =70.3%
Clinical pregnancy =59.1%
Ongoing pregnancy =50.5%

Examination of patients 15 and 30 days post oocyte retrieval for development of pregnancy-induced late OHSS.

n=10 patients:
Cancellation of embryo transfer due to other reasons

Monitoring of severe OHSS
Follow up on Days 7,9,11 post oocyte retrieval.

No development of severe OHSS

4 patients developed pregnancy-induced late OHSS and were hospitalized.