Ovarian stimulation strategies: Nurturing efficiency in ART
7 October 2017 - Marrakech, Morocco
Ovarian stimulation strategies: Nurturing efficiency in ART

Overview
Success rates following IVF treatment have increased significantly since the early days, mainly contributed by the introduction and use of ovarian stimulation. Controlled ovarian stimulation (COS) has a vital role in IVF by allowing control of the various events and increasing the number of oocytes to optimise outcomes. The aim of COS is to achieve maximal success with minimal side effects. Other important aspects to be considered are cost-effectiveness and patient compliance. Progress in our understandings of ovarian physiology and new advances in ovarian stimulation strategies have made it possible to achieve the best outcomes with COS. The aim of this workshop is to lay out ideal outcomes desired by patients, embryologists, clinicians following ART and fine-tuned, individualised approaches towards attaining these goals.

Learning objectives
By attending this live educational workshop, participants will be able to:
- Define laboratory and clinical outcomes for defining success in ART
- Key factors influencing the success of ART
- Tailor the best stimulation protocol for patient undergoing ART
- Discuss and debate changing approaches to ART

Target audience
This programme is designed for clinicians and biologists working in assisted reproductive medicine, who want to acquire up-to-date information for improving their current practice.
CME Provider

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Venue
This live educational workshop takes place at:

Grand Savoy Hotel
Avenue Prince My Rachid
40000 Marrakech, Morocco

Language
The official language of this live educational workshop is English. Simultaneous translation from and to French is provided.

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Faculty

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PROGRAMME
Saturday, 7 October 2017

9.00 Opening and introduction
R. Fischer (Germany)

Session I

9.10 L1: What is success in ART?
  (Laboratory and clinical outcomes for defining success in ART)
  A. Revelli (Italy)

9.40 L2: Number of oocytes for optimising IVF outcomes
  S.K. Sunkara (UK)

10.10 L3: Female age, ovarian reserve and ovarian reserve tests: implications for ART
  A. Revelli (Italy)

10.40 Coffee break

11.00 L4: Ovarian response groups, suboptimal response and The POSEIDON concept
  S.K. Sunkara (UK)

11.30 L5: What kind of gonadotropins to use?
  J.N. Hugues (France)

12.00 L6: Stimulation strategies for overcoming impaired response
  J.N. Hugues (France)

12.30 Lunch

Legend:

L : Lecture    : Interactive case studies
Session II

13.30  L7: Is there a place for mild stimulation and modifying natural cycle in ICOS?
        J.N. Hugues (France)

14.00  L8: Is the time ready for all freeze strategy for all patients?
        S.K. Sunkara (UK)

14.30  Coffee break

14.50  Interactive case studies
        A. Revelli (Italy) - S.K. Sunkara (UK)

16.50  Concluding remarks
        R. Fischer (Germany)

17.00  End of the workshop
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**Robert Fischer**  Declared no potential conflict of interest

**Jean Noel Hugues**  Declared receipt of grants and contracts from Merck

**Alberto Revelli**  Declared receipt of honoraria or consultation fees from MSD, Merck, Ferring. He declared participation in a company sponsored speakers’ bureau: Ferring and Merck

**Sesh Kamal Sunkara**  Declared receipt of honoraria or consultation fees from Merck and Ferring. She declared participation in a company sponsored speaker’s bureau: Merck Europe, Ferring UK, MSD
Robert Fischer is founder and Medical Director of the IVF unit at the Fertility Center Hamburg - one of Germany’s largest and leading IVF centres. In July 1998 the Fertility Center Hamburg was one of the first centres in Germany, and worldwide, to introduce certified quality management according to the ISO 9001. In 2002, the IVF laboratory became ISO 17025 certified. Prior to these developments, in 1983 he pioneered and was medical director of the first outpatient IVF unit in Hamburg. Author of numerous publications in national and international scientific journals and books, as well as lecturer at conferences worldwide, he is also an active member of the American Society of Reproductive Medicine, founding member of the European Society of Human Reproduction and past member of its advisory committee as well as founding member of the German reproductive organisations, “AG Gynäkologische Endokrinologie und Fortpflanzungsmedizin” and “Berufsverband Reproduktionsmedizinischer Zentren”.

Robert Fischer
Fertility Centre Hamburg
Hamburg, Germany
Jean Noel Hugues is a specialist in reproductive medicine and works as Head of the Reproductive Medicine Unit at the Jean Verdier Hospital - University Paris XIII in Paris, where he also teaches as Professor in Biology & Medicine of Development and Reproduction. Apart from his clinical practice he is also a member of the French, European and American societies of Reproductive Medicine and participated at a variety of international conferences and symposiums.
Alberto Revelli has a Degree cum laude in Medicine (1984), with a Specialization in Obstetrics and Gynecology (1988), and a PhD in Obstetrical and Gynecological Sciences (1996) from the University of Torino, Italy. From 1999 to 2005, he was a researcher in Obstetrics and Gynecology, from 2006 to 2015 an Aggregate Professor and from 2015 to present he is an Associate Professor in Obstetrics and Gynecology at S. Anna Hospital, University of Torino, Italy. Since 1999, he has been a lecturer of Reproductive Biotechnology and IVF at the School of Medical and Molecular Biotechnology, the School of Medicine (degree in Obstetrics), at the Specialization Schools in Gynecology and Obstetrics, in Endocrinology, in Medical Genetics, in the PhD course of Clinical Sciences, and in the II Level Master course in Physiopathology of Reproduction and ART, all at the University of Torino, Italy. Presently, he is Director of the Physiopathology of Reproduction and IVF Unit at S. Anna Hospital, Director of the II Level Master course in Physiopathology of Reproduction and ART, an IVF consultant at LIVET Clinic for Assisted Reproduction in Torino, Italy, and member of the Group of Fertility Experts of the Italian Ministry of Health.

He has authored of 98 articles in peer-reviewed journals (available through PubMed), one book, 26 book chapters and several articles on proceedings, with an H index of 22 (7/3/2017).
Sesh Kamal Sunkara is a Consultant Gynaecologist and Subspecialist in Reproductive Medicine and Surgery. She specialised in the field of Obstetrics and Gynaecology and is a Member of the Royal College of Obstetricians and Gynaecologists (MRCOG), UK. She undertook translational research in Reproductive Medicine at the Assisted Conception Unit, Guy’s and St Thomas’ NHS Foundation Trust and King’s College London which formed the basis for her Research degree in Reproductive Medicine; Doctor of Medicine (MD) awarded by King’s College London. She has dual accreditation with the UK General Medical Council as a specialist in Obstetrics and Gynaecology as well as Reproductive Medicine. She worked as a Consultant gynaecologist and Subspecialist in Reproductive Medicine at the Aberdeen Fertility Centre, University of Aberdeen before moving to Barking Havering and Redbridge University Hospitals to set up a new IVF service. In addition to her clinical work, she has published in the field of Reproductive Medicine and authored several book chapters. She has organised and participated in several national and international symposia and workshops in the field of Reproductive Medicine.

She is the Associate Editor for Human Reproduction Journal by the European Society of Human Reproduction and Embryology (ESHRE). She is on the executive board for the RCOG – Reproductive Medicine Clinical Studies Group which is actively involved in supporting multi-centre research studies in the UK.
LEARNING OBJECTIVES
What is success in ART? (Laboratory and clinical outcomes for defining success in ART)

A. Revelli (Italy)

Learning objectives:

• Define success of IVF in terms of preclinical (Fert rate, IR etc) and clinical outcomes (LBR, multiple births, OHSS etc).
• Discuss cumulative live birth as an outcome measure
• Introduce the concept of time to pregnancy as an outcome
Number of oocytes for optimising IVF outcomes

S.K. Sunkara (UK)

Learning objectives:

• Address the relationship between number of oocytes and pre-clinical IVF outcome
• Address the relationship between number of oocytes and clinical IVF outcome
• Discuss optimal number of oocytes with stimulation protocols to achieve for best outcomes
Female age, ovarian reserve and ovarian reserve tests: implications for ART

A. Revelli (Italy)

Learning objectives:

• Address the effect of female age on ART success
• Address the effect of ovarian reserve on IVF outcomes
• Define the application of ovarian reserve tests in current practice
• Appraise the accuracy of currently used ORTs
Ovarian response groups, suboptimal response and The POSEIDON concept

S.K. Sunkara (UK)

Learning objectives:
• Describe what ovarian response groups are
• Define ovarian response group features
• Define the suboptimal response groups
• Elaborate the POSEIDON criteria
Learning objectives:
- Define different types of gonadotropins
- Identify available gonadotrophins
- Determine circumstances when the choice of gonadotrophin matters specifically, especially for individualised COS

What kind of gonadotropins to use?

J.N. Hugues (France)
Learning objectives:

• Identify stimulation strategies for the poor responder
• Determine stimulation strategies for older women
• Identify stimulation strategies for the suboptimal and hypo responder
• Discuss strategies for PCOS

Stimulation strategies for overcoming impaired response

J.N. Hugues (France)
Is there a place for mild stimulation and modifying natural cycle in iCOS?

J.N. Hugues (France)

Learning objectives:
- Define iCOS
- Define mild stimulation
- Define natural cycle and MNC
- Debate whether mild stimulation or iCOS offer better success with regard to live birth and cumulative live birth
Is the time ready for all freeze strategy for all patients?

S.K. Sunkara (UK)

Learning objectives:
• Why Freeze all is being proposed?
• What are the likely advantages, disadvantages in adopting such a strategy
• What does current evidence suggest?
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