# GROWTH DIFFERENTIATION FACTOR-8 EFFECT ON PROGESTERONE LEVELS DURING CONTROLLED OVARIAN STIMULATION IN INTRACYTOPLASMIC SPERM INJECTION

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#### INTRODUCTION

Intracytoplasmic sperm injection includes ovarian stimulation to retrieve mature oocytes, fertilize them by sperms and then embryo transfer after endometrial preparation.GDF-8 is a growth factor belonging to the transforming growth factor-  $\beta$  (TGF- $\beta$ ) superfamily that found to be highly expressed in the female reproductive system in addition to its first discovered site of release from myocytes and showed to have a dynamic trend, regulatory role and negative correlation with progesterone serum levels during controlled ovarian stimulation (COS).

## AIM OF THE WORK

The aim of this study was to investigate the role of GDF-8 in regulating progesterone levels during controlled ovarian stimulation in patients undergoing IVF-ICSI- ET and evaluate its effect on pregnancy rate.

## PATIENTS AND METHODS

42 women undergoing intracytoplasmic sperm injection are enrolled in a prospective cohort study. Patients are selected with the fulfillment of the inclusion criteria.

GDF-8 and progesterone (P4) serum levels both were measured in this study at 3 different time points during COS, human chorionic gonadotropin (hCG) administration day, oocyte pick up (OPU) day and 14 days after embryo transfer.

### **RESULTS**

**Table 1:** Comparison between GDF-8 cut-off level of <3.9 and ≥3.9 (ng/ml) in relation to P4 serum level at the time of trigger administration "hCG day" and pregnancy outcome.

Pregnancy Outcome	Serum GDF-8 level (ng/ml)at time of trigger "hCG day"				Test	p-value	Sig.
	<3.9(ng/ml)		≥3.9(ng/ml)		value		
	No.	%	No.	%			
Pregnant	2	25%	32	94.11%			
Non-Pregnant	6	75%	2	5.88%	8.682	0.001	HS
Total	8	100.0%	34	100.0%			

Using: Chi-square test

NS: Non significant; S: Significant; HS: Highly significant

**Table 2:** Comparison between GDF-8 serum decrease with cut-off level of <1.35 and ≥1.35 (ng/ml) and P4 increase level (from the day of hCG administration to the day of OPU) and pregnancy outcome.

Pregnancy Outcome	in	GDF-8 dec serum (fro CG to the	m the d	Test value	p-value	Sig.	
	<1.35(ng/ml)		$\geq$ 1.35(ng/ml)		. 332020		
	No.	%	No.	%			
Pregnant	3	33.33%	31	93.9%		0.001	HS
Non-Pregnant	6	66.66%	2	6.1%	7.382		
Total	9	100.0%	33	100.0%			

Using: Chi-square test

NS: Non significant; S: Significant; HS: Highly significant

**Table 3:** Sensitivity and specificity for prediction of pregnancy using GDF-8 and P4 serum level (ng/ml).

Groups	Cut- off	Sen.	Spe.	PPV	NPV	Accuracy %
Serum GDF-8 level (ng/ml)						
Serum GDF-8 level (ng/ml) at time of trigger "hCG day"	≥3.9	94.3%	71.4%	94.3%	71.4%	90.5%
Serum GDF-8 decrease level (from hCG day to OPU day)	≥1.35	93.9%	55.6%	88.6%	71.4%	85.7%
Serum P4 (ng/ml)						
Serum P4 level At time of trigger "hCG day"	<1.5	88.8%	67.2%	88.8%	67.2%	87.2%
Serum P4 Increase (from hCG day to OPU day)	>16.03	91.5%	69.3%	91.5%	69.3%	87.8%

Sens.: Sensitivity; Spec.: Specificity; PPV: Positive predictive value; NPV: Negative predictive value

#### **CONCLUSIONS**

On the basis of the findings of the present study, we may infer that during controlled ovarian stimulation, serum GDF-8 levels exhibit a dynamic pattern in conjugation with serum progesterone.

Pregnancy after IVF-ET may be accurately predicted by a high serum level of GDF-8 on the day of trigger administration together with a decline in this level from the day of trigger to the day of oocyte pick up.



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