



n= 362 patients

At high risk for OHSS on day of triggering final oocyte maturation.

n=9 patients

GnRH agonist
to trigger final oocyte maturation
and embryo cryopreservation.

No OHSS

n=353 patients

5000 IU hCG
to trigger final oocyte maturation

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

No severe OHSS on D5

n= 313 patients

n=10 patients:

Cancellation of embryo
transfer due to other reasons

n=303 patients:

Proceeded to embryo transfer:

- Positive hCG test =70.3%
- Clinical pregnancy =59.1%
- Ongoing pregnancy =50.5%

Monitoring of severe OHSS

Follow up on Days 7,9,11
post oocyte retrieval.

No development of severe
OHSS

Monitoring of severe OHSS

Follow up on Days 7,9,11 post
oocyte retrieval.

Confirmation of regression of
severe OHSS.

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

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

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