

CHR
THE CENTER FOR HUMAN REPRODUCTION

21 East 69TH Street, New York, N.Y. 10021 – Tel: 212.994 4400 – Fax: 212.994 4499

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CONTACT: Galina Filonenko (212-994 4400)

PRESS RELEASE

Study on twinning, conducted by New York City based fertility center, contradicts world-wide consensus.

A study, pre-released in electronic format on April 29, 2008 by the prestigious medical journal, *Fertility and Sterility*, the official organ of the American Society for Reproductive Medicine (ASRM), suggests that the world-wide belief that twin pregnancies after infertility treatments represent higher risk outcomes for mothers and offspring than singletons and, therefore, should be avoided, may have to be reconsidered.

The two authors of the study, both from New York's Center for Human Reproduction (CHR), argue in their publication that, since a large majority of infertile couples are desirous of at least two children, it is statistically incorrect to consider outcome risks of spontaneously conceived singleton and twin deliveries as representative of the potential risks faced by infertile patients with singleton and twin deliveries. Since an infertile couple would have to undergo two singleton deliveries, but only one twin delivery, to achieve their goal of two children, the correct statistical comparison of risk was, instead, a comparison of twin risk to TWO singleton delivery risks.

When this is done, as the authors now demonstrate in their published paper, twin pregnancies no longer show more risks to mothers and offspring or higher costs to society.

“This is one example, unfortunately amongst too many in medicine, how a perfectly reasonable treatment paradigm in one patient population was erroneously, and without proper thought, applied to another patient population,” states Norbert Gleicher, MD, Medical Director of CHR and lead author of the study. And he continues: *“The consequences, of course, have been significant because infertility patients world-wide have been advised to avoid twin pregnancies through single embryo (rather than 2-embryo) transfer and, as the literature convincingly demonstrates, single embryo transfers reduce pregnancy chances significantly in comparison to 2-embryo transfers. Patients, therefore, reduced their pregnancy chances for no obvious benefit.”*

Dr. Gleicher and his co-author, David Barad, MD, MS, are available for further comments. Dr. Gleicher is also a Visiting Professor at Yale University, New Haven, CT, while Dr. Barad is an Assoc. Clinical Professor at Albert Einstein College of Medicine, Bronx, NY.

