



The Center for Human Reproduction

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Clinical Care • Research • Education

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New York Fertility Center Awarded Important Patent

Investigators at New York's **Center for Human Reproduction (CHR)** in 2004 started to suspect that the mild male hormone **dehydroepiandrosterone (DHEA)** may exert beneficial effects on "older" ovaries.

After publishing a first paper in 2005, funded by the Foundation for Reproductive Medicine and intramural CHR funds, they expanded the research and in a series of publications reported that DHEA, in women with so-called diminished ovarian reserve (DOR), increases egg and embryo numbers during in vitro fertilization (IVF), objectively improves ovarian reserve, improves egg and embryo quality, improves pregnancy chances with IVF, reduces miscarriage rates and, therefore, increases live birth rates and, thus, potentially greatly improves overall pregnancy chances for many infertility patients.

While initially greeted with skepticism, DHEA is now widely used, and investigators from all over the world have started reporting similar results as originally reported by CHR.

We are now pleased to announce that the United States patent and Trademark Office also has recognized this work of CHR investigators by mailing a Notice of Allowance for a patent application, serial number 11/269,310, titled:

"Method of Improving Cumulative Embryo Score and Quantity of Fertilized Oocytes, Increasing Euploidy Rate and of Normalizing Ovarian Function Using an Androgen Such as Dehydroepiandrosterone [DHEA]."

In the U.S. DHEA is paradoxically considered a food supplement and, therefore, available without prescription. In other developed countries DHEA is only available by prescription. Studies conducted at CHR, however, exclusively used pharmaceutical grade DHEA, compounded by pharmacies, and no over-the-counter products.

Dr. Gleicher, a principal DHEA investigator at CHR and also its Medical Director, therefore, notes: *"We will be pleased to license our patent rights for these new applications of DHEA, as long as we receive adequate assurances about quality and consistency of the final DHEA product."*

Norbert Gleicher, MD and David H. Barad, MD, MS, the two principal DHEA investigators, and Dwyn Harben, the first DHEA patients at CHR, who through her use of DHEA in 2004 initiated the investigations, are available for further comments.

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