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Administration of Sai-rei-tou and cabergoline is effective to prevent severe OHSS

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#### Objective

The prophylactic cabergoline administration has been shown to effectively avoid severe OHSS following in controlled ovarian stimulation (COS). Besides this, a herbal medicine Sai-rei-tou (TJ-114) is known to induce the fluid shift from the third space to intravascular space due to its steroid-like effect. We conducted this study to investigate whether administration of TJ-114 and cabergoline reduces the incidence of OHSS in agonist long protocol.

#### Design

Retrospective clinical study.

#### Materials and methods

One hundred fifty-six patients who had COS with agonist long protocol showed their serum E2 exceeding 3500pg/ml. We divided them in following three groups. Group A: no medication, B: cabergoline 0.5mg/day, C: TJ-114 7.5g/day and cabergoline 0.5mg/day. Seven days after OPU, we performed ultrasonography to measure ascites volume and ovarian size and ran a blood test to evaluate hemoconcentration. We employed the classification of the Japan Society of Obstetrics and Gynecology to evaluate OHSS. Statistical analysis of this data was performed using t-test and  $p < 0.05$  was considered significant.

#### Results

The mean age of the patients and maximum serum E2 level were comparable in three groups. The volume of both ovaries after OPU was significantly smaller in Group C than A ( $p < 0.05$ ). The average grade of OHSS was significantly lower in Group C than A ( $p < 0.05$ ). However there was no difference in hematological value and ascites volume in three groups.

#### Conclusion

Our study suggested that the administration of TJ-114 and cabergoline was effective to prevent severe OHSS in agonist long protocol.