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Message from the President

Joe Leigh Simpson
President of IFFS

IFFS activities continue unabated a year following our highly successful IFFS/ASRM Triennial Congress in Boston. Forthcoming within an upcoming six month interval are both the 2014 International Joint Meeting IFFS-SAMeR (Sociedad Argentina de Medicina Reproductiva) in Buenos Aires and the 2015 IFFS-JSRM (Japan Society for Reproductive Medicine) International Meeting in Yokohama.

The South American continent will see considerable IFFS activities in 2014 - 2015. Our 2014 Symposium in Buenos Aires will be held in conjunction with the XVI Argentine Congress on Reproductive Medicine, Nov. 11-14. IFFS involvement has been spearheaded by IFFS Board member Marcos Horton. IFFS will provide pre-congress courses and multiple keynote lectures, in conjunction with speakers from the Argentine Society of Reproductive Medicine, and elsewhere. Immediately prior to the Buenos Aires meeting, Fernando Zegers-Hochschild will conduct an IFFS/Symposium on ethics in Santiago, Chile: “Harmonizing Science and Bioethics When Confronting Reproductive Challenges”. In early spring 2015, IFFS Education Director Paul Devroey will lead a workshop in Lima, Peru.

The 2015 Regional International Symposium in Yokohama will be held April 26 – 29, 2015 in conjunction with the Japan Society for Reproductive Medicine. IFFS Board Member Minoru Irahara is heading IFFS activities, working with his colleagues Tadashi Kimura and Osamu Ishihara, and placing IFFS speakers in keynote positions. The IFFS Trilogy concept will be applied throughout the meeting. Novel at this meeting is that trilogies will consist whenever appropriate of one speaker from Japan, one from elsewhere in Asia, and one from the remainder of the world.

Yokohama will be a seamless ramp up to the Triennial 2016 IFFS Congress, to be held in New Delhi, Sept. 24-27, 2016. The Scientific Committee (see masthead) is already at work, including also representatives from elected member societies which were cited in the previous Newsletter. The Committee met in Munich (ESHRE) to begin selecting topics for trilogies and keynotes, after which speakers will be identified. The Chinese Society Reproductive Medicine - Congress Chair (Zi-Jiang Chen) and Local Scientific Committee Chair (Qiao Jie) - are involved in preparation for IFFS 2019 in Shanghai.

At the 2013 General Assembly in Boston, new appointments were announced. These included Tina Buchholz as Scientific Director; Basil Tarlatzis as Director of External Affairs and Mauricio Abrao as Associate Director; and Associate Director of Education Bruce Dunphy. Biosketches of Drs. Buchholz and Dunphy were provided in the last Newsletter. In this Newsletter Basil Tarlatzis, Assistant Treasurer Hrishikesh Pai, and Assistant Secretary General Zi-Jiang Chen are featured.

We are in addition thrilled to announce one new appointment. David Adamson, formerly ASRM representative on the IFFS Board, has accepted the responsibility as Liaison from Reproductive Medicine WHO NGOs (Non-Governmental Organizations). David is unique in being Chairman of International Committee Monitoring Assisted Reproductive Technologies (ICMART), Chair of the FIGO Committee for Reproductive Medicine, and former President of the American Society Reproductive Medicine (ASRM). All three organizations are NGOs in official relations with WHO, as is IFFS. This appointment will provide the IFFS Board with the ongoing benefit of David’s corporate memory and knowledge of activities being undertaken in fellow NGOs.

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Member Societies and readers are invited to send all comments, reports or articles of 800 - 1200 words no later than 1st February for the Spring Issue and 1st July for the Autumn Issue. The views expressed in articles in the IFFS Newsletter are those of the authors and do not necessarily reflect the official viewpoint of IFFS.
The IFFS International Scientific Committee for the 2016 World Congress in India met during the last ESHRE Congress in Munich, in order to start the preparation of the scientific program.

The format will be the same with the previous IFFS Congresses, comprising pre-congress courses, keynote lectures and trilogies. The Courses cover a wide range of topics in Reproductive Medicine, aiming to provide an update for clinical practice. The Keynotes - including the De Watteville, the Jean Cohen and the David Healy lectures - are delivered by renowned speakers on broader topics of great interest. On the other hand, the trilogies, an IFFS “trademark”, address a specific topic from three different aspects: basic, translational and clinical.

The members of the International and of the Local Scientific Committees were asked to submit in advance their proposals, including the title of the Session, the specific topics and the possible speaker(s). The aim was to cover all the latest developments in the field of Reproductive Medicine, also taking into account issues that are of particular interest to the host country and, wider, to this part of the world. In addition, special attention is given to include the best possible speakers from different countries represented in IFFS.

In this first meeting, a provisional list of topics for Keynotes and Trilogies was created, including preimplantation genetic diagnosis and screening, environmental toxicants and reproduction, embryo selection, prevention of OHSS, ART outcomes, ethics, endometriosis, menopause and contraception, endocrine disorders and reproduction, infections and infertility, fertility preservation, premature ovarian insufficiency and polycystic ovary syndrome, while one Trilogy will be developed by WHO, as part of our longstanding collaboration and our NGO status. All members of the two Committees have been invited to revisit this list and propose specific titles and speakers.

The plan is to finalize the scientific program during the next meeting of the International and the Local Committees in Honolulu, during the ASRM Congress, in order to start immediately thereafter to invite the speakers. Hence, we aim to have the final program ready and printed for next year’s ESHRE Congress in Lisbon. We are confident that it will be a very exciting program that will meet the expectations of all the colleagues who will join us in Delhi in 2016. See you then!
Clinical practice guidelines have been defined as systematically developed aides to assist practitioner and patient decisions about appropriate healthcare for specific clinical circumstances. Guidelines are designed to improve the quality and safety of patient care through evidence-based practice. Several organisations have produced guidelines in Reproductive Medicine including ASRM, ESHRE and the RCOG. The (UK) National Institute of Clinical Excellence (NICE) was the first to publish a comprehensive guideline \(^1\) and WHO are currently developing a similar guideline.

Practice lacking a scientific basis is commonplace in reproductive medicine and this limits our ability to produce high quality guidance, many guidelines being based on opinion and good clinical practice. This is a justifiable criticism and is often put forward as a reason not to follow guidelines. However, the absence of good quality evidence is also good reason not to undertake diagnostic or treatment procedures which are by definition unproven and may carry significant risks. Adjuvant therapies in assisted reproduction are one example of treatment lacking evidence. Clinicians understandably wish to maximise clinical outcomes and vulnerable patients will do whatever they can to increase the chance of pregnancy. The British Fertility Society will be publishing guidance on this imminently and concludes there is a lack of robust evidence.

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for a range of empirically used adjuvants, which therefore cannot be recommended².

Not so with recent guidance on the management of pelvic pain due to endometriosis produced by ASRM (2014)⁴ and ESHRE (2013)⁴. As would be expected drawing from a similar high grade evidence base, the recommendations are also similar. For example, both recommend when endometriosis is identified at laparoscopy, clinicians should surgically treat endometriosis, as this is effective for reducing endometriosis-associated pain i.e. ‘see and treat’. Both organisations also concluded that Laparoscopic Uterosacral Nerve Ablation (LUNA) confers no benefit as it does not improve pelvic pain over surgery alone.

Another example of guidance based on good quality evidence includes the ASRM guideline on Elective Single Embryo Transfer (eSET)⁵ which concluded a) Elective SET should be offered to patients with a good prognosis and to recipients of embryos from donated eggs; b) IVF centers should promote eSET when appropriate through provider and patient education and c) Improvements in embryo selection should further increase the application of eSET.

IFFS also produces a series of practice guides but with particular application across a range of resource settings. Recently published guidance on Ovarian Hyperstimulation Syndrome recommends the use of pre-treatment with Metformin in women with polycystic ovaries, stimulation cycle with reduced FSH dosage and LHRH antagonists and LHRH analogue trigger and embryo freezing. Guidance on Blastocyst Transfer includes recommendations that blastocyst transfer should be considered in “good prognosis” patients as this increases live birth rates but that the transfer of more than one blastocyst in this group markedly increases the risk for multiple pregnancy and should be avoided (IFFS, Practice and Standards Committee, 2013). Newly published guidance on the diagnosis and treatment of non-obstructive azoospermia is now available and soon to be released is guidance on recurrent pregnancy loss (RPL). This concludes that couples with idiopathic RPL have a high chance of a successful outcome without intervention. It recommends that women with RPL and Anti Phospholipid antibody Syndrome should be treated with aspirin and heparin, that anatomical uterine distortion may have a causal role but that the evidence base for surgical intervention and correction is weak. It also recommends that routine testing for peripheral blood natural killer (NK) cells and cytokine tests are not recommended (IFFS, Practice and Standards Committee, 2014).

Despite wide promulgation, guidelines have had limited effect on changing physician behaviour. Multiple barriers impede physician adherence to subfertility guidelines, mainly physicians’ lack of self-efficacy and low outcome expectancy. Both physicians and patients play an important role in the prospective identification of efficient strategies necessary to improve implementation and optimize subfertility care⁶. These will be multifaceted including audit and feedback facilitated by local opinion leaders and national fertility societies is recommended to effectively change clinician behaviour and improve clinical outcomes⁷.

In conclusion clinical guidelines are an essential clinical tool to support the delivery of safe and effective patient care. Successful implementation requires a collaborative approach supported by professional leadership, clinician engagement and consumer information. Finally, the reproductive medicine community should support collaborative research to effectively evaluate unproven therapies.

More than 8,800 participants overall visited Munich early July 2014 for the 30th ESHRE conference. Nearly 1,500 abstracts - with most contributors coming from the United Kingdom, Turkey, Spain, Japan and Italy - were submitted from overall 71 countries. Topic wise the most contributions were to Embryology (clinical), but also further main topics were Reproductive Endocrinology, Female infertility and Andrology, all for clinical applications more than for basic research. The 14 Pre-Congress Courses were mostly visited for Reproductive Genetics, Early Pregnancy and Reproductive Endocrinology, and for Embryology.

The two honorary lifetime memberships were awarded first to the 2012 Nobel Prize winner Professor John Gurdon from Cambridge, UK. His major work focused on nuclear transfer of embryonic stem cells versus IPS cells, on ethics considerations and on why young researchers should never give up. The second went to emeritus Professor Klaus Diedrich from Luebeck, Germany, who is one of the founding members of ESHRE and one of the leading reproductive medicine expert in Germany.

Several other prizes were awarded to congress participants: the best oral presentation on a basic science topic went to Jingjie Li from China for the following investigations: A modified human growth differentiation factor 9 is potently active in a porcine IVM model with inherent low oocyte developmental competence.

The best oral presentation on a clinical science topic was held by Tarek El-Toukhy from United Kingdom about their work: A multicentre randomised study of pre-IVF outpatient hysteroscopy in women with recurrent IVF failure – the TROPHY TRIAL. Essentially the study revealed that outpatients hysteroscopy before IVF does not significantly improve IVF results and can therefore not be considered essential prior to treatment. Despite smaller studies had suggested a benefit previously, the TROPHY TRIAL, including data from 8 European Centers with more than 700 hundred woman revealed a nearly equal live birth rate with 31% for the hysteroscopy group and 29% for the control group. All patients were less that 38 years of age and had a history of unsuccessful IVF treatment. Eleven percent of the hysteroscopy group showed essential uterine abnormalities. On the other hand several studies and meta-analysis have shown endometrial scratching might be beneficial. The proposed theory includes the idea that the mechanical trauma might alter gene expression, enhances growth factors and thus makes the endometrium more receptive for implantation. It has even been suggested to promote endometrial scratching as a standard procedure in the preceding cycle to IVF.

The Fertility Society of Australia Exchange Award, an educational travel grant, will allow one of the participants of ESHRE 2014 to present the data of his/her oral presentation at the annual meeting of the Fertility Society of Australia, was awarded to Ali Abarra from United Kingdom, for the contribution of Kisspeptin – a novel physiological trigger for oocyte maturation in IVF treatment. This new insight received great attention by the international professional and lay media. The expectation to reduce ovarian hyperstimulation by adding a new physiological supplement promises IVF to become an even more safe procedure.

Continuous interest and research regarding the safety of ART lies in the follow up of association of ovarian stimulation and the longterm risk of developing hormone depending malignancies such as breast or ovarian cancer. According to Bert Scoccia from Chicago a 30 year follow up of nearly 10.000 women, who underwent infertility treatment from 1965 to 1988 at 5 US medical centers revealed only little evidence of an increased risk overall. In subdividing, a high risk for breast cancer was detected by administrating clomiphene citrate for 12 cycles or more. Gonadotrophins, were only associated with an elevated risk in a subgroup of women who remained unsuccessful with the treatment. Those long-term, retrospective studies with enough statistical power can only reveal subtle differences which warrant further intensive monitoring on the subject world wide.

Intensive discussion continued for fertility preservation due to improved technical means as well as for expanded indications, medical and social. Adjacent to this
progress there is a world wide increased demand for egg donation. But research for pregnancy outcomes has just about started. A very important, but as well critical study was presented by a Helene Letur from France. Egg donor treatment, which accounts for about 4% of all infertility treatment in Europe, but is rising (12% in the US), is more common among older women then younger. Their success rate is enormously increased (up to 55% per transfer according to US data), since the outcome is mainly depending on the age of the donor than the age of the recipient. However pregnancy induced disorders occur at a significant higher risk, particularly pregnancy induced hypertension (PIH), according to their multicenter study including more than 500 pregnancies. Nearly 18% of pregnancies had PIH and nearly 12% suffered from pre-eclampsia, which demands that preventive care has to be obeyed for those pregnancies at risk.

Both the local Scientific Committee and the International Scientific Committee have worked hard to put together a proper program, with hot topics such as genomics, reprogenetics, embryo time-lapse monitoring and others of great importance for our specialty, like continuous medical education, guidelines and regulatory aspects, as well as social and ethical issues.

We have set up a wonderful team of renowned speakers, thanks to the generous collaboration from IFFS, Dr. Joe Leigh Simpson, current President of IFFS, Dr. Richard Kennedy, its President elect, Dr. Paul Devroey, Medical Education Director, Dr. Basil Tarlatzis, Past President of IFFS, Dr. Tina Buchholz, Scientific Director of IFFS, and special guest Dr. Stratis Kolibianakis, who will participate in the Courses and the Main Program as well.

A high number of delegates (around 700) is expected, not only from Argentina, but also from Latin American neighbour countries, with special focus on young physicians and embryologists, who frequently attend our courses and scientific meetings.

See you in November!
Dr. Hrishikesh Pai has been one of the pioneers in the field of ART in India. Presently he is President of the Indian Society for Assisted Reproduction for the next two years. He is taking over as the Secretary General of the Federation of Obstetrics and Gynaecological Societies of Indian from Jan 2015 till 2018. Six months back Dr. Pai had the privilege of getting nominated for the post of Assistant Treasurer of the IFFS.

Dr. Pai started his IVF career in 1984 by being associated with the Indian team which delivered the second IVF baby in India. In 1989, he did a research fellowship in reproductive biology at the Royals Women’s Hospital, Australia. He started his first IVF centre in 1991. In 2007, Dr. Pai did the masters degree in clinical embryology from the Eastern Virginia Medical School USA.

Presently he is the Director of the Bloom IVF Group which runs 12 fertility clinics which includes seven stand-alone IVF centres all over India. His group won the 2013 Frost and Sullivan Health care excellence award for the Best IVF clinics in the country. He has also been the adjunct Assistant Professor at the Eastern Virginia Medical School, USA.

Dr. Pai has been the post graduate and under graduate teacher both in the field of gynecology and reproductive medicine. In the past Dr. Pai has held prestigious positions like President of the Mumbai Obstetrics and Gynaecological Society and the Indian Association of Gynaecological Endoscopists. In 2013 Dr. Pai organized one of the largest medical conferences in India which had 12000 participants.

Dr. Pai has been the first doctor in India to introduce the following innovations in medical fields such as assisted laser hatching, spindle view, ovarian tissue freezing, oocyte freezing, freezing embryos with vitrification, IMSI and embryoscope. Dr Pai has delivered more than 400 talks & contributed chapters to more than 30 textbooks . In 2009 he became the Founder & Executive Editor of the Journal of Gynecological Endoscopy and Surgery.

Dr. Pai had carried out numerous social activities in his career. He was the Honorary Asst. Consultant for Kurla Municipal hospital, serving patients for free for nearly two decades. As the been the Director of Nirala senior citizens home’, has conducted Vaccination programme in the slums of Malawni, Mumbai for which he won Best Intern’s Prize. He has been the Medical Director of Pearl Family Welfare Hospital (recipient of many awards from govt of India). He has been twice community service director Rotary club of Mumbai mid city and has organized numerous family planning, cataract and health camps.

Has won numerous awards such as Rajiv Gandhi award, Navshakti award, Jai hind alumni award & best doctor award by IMA Mumbai west branch and RK Health care excellence award.

Dr. Pai has been actively associated with the World Surveillance Board of the IFFS. He is the organizing secretary of the local committee which is organizing the world conference of the IFFS in Noida (India) in 2016.
Dr. Chen serves as professor of OB/GYN and Reproduction, Vice President of Shandong University for Health Affairs, Vice President of Renji Hospital, Shanghai Jiao Tong University School of Medicine, Director of National Research Center for Assisted Reproductive Technology and Reproductive Genetics, China.

Prof. Chen has practiced for more than 20 years in Gynecology and Reproduction. She focuses on PCOS, POF etc. common gynecological endocrinology disorders in both clinical and etiology. She has conducted genome-wide association studies (GWAS) and other molecular genetics mechanism studies for PCOS, POF etc. She has also contributed a lot to the improvements of ART in China. Over 10,000 cycles of IVF/ICSI and over 300 PGD/PGS cycles (FISH or array-CGH) are performed per year in her Center. Prof. Chen has more than 300 publications on journals such as Nat Genet, Am J Hum Genet, Nature Communication, Hum Mol Genet, Fertil Steril, Hum Reprod, et al.

Prof. Chen also serves as the Vice President of Chinese Society of Reproductive Medicine, Chief of Chinese Gynecological Endocrinology of OB/GYN Society, External Expert of the International Olympics Committee (IOC) Medical Commission and Consultation Expert of Expert Working Group (EWG), Geneva Foundation for Medical Education and Research (GFMER) in collaboration with World Health Organization (WHO), Assistant Secretary General of International Federation of Fertility Societies (IFFS).

Basil C. Tarlatzis, M.D., Ph.D. serves as professor of Obstetrics – Gynaecology & Reproductive Medicine,

Aristotle University of Thessaloniki, Greece
Past Dean, School of Medicine,
Aristotle University of Thessaloniki, Greece
Vice President of the Council,
Aristotle University of Thessaloniki
Visiting Professor, Faculty of Medicine and Pharmacy,
Dutch-speaking Brussels Free University (AZ-VUB)
Past Deputy Chairman of the National Authority of Medically Assisted Reproduction
Past Chairman of the European Society of Human Reproduction and Embryology (ESHRE) and
Member of the Ethics and Law Committee of ESHRE
Past President of the International Federation of Fertility Societies (IFFS)
Member of 24 National and 18 International Scientific Societies
Editorial Board Member of 7 National and 14 International Scientific Journals
Editor or Co-Editor in 5 Scientific Books
294 Publications in International peer-reviewed Scientific Journals
(8926 citations) and 80 in National Journals
32 Publications in International Books and 29 in National Books
45 Publications in Proceedings of International Congresses and
42 Publications in Proceedings of National Congresses
152 Abstracts in International Congresses and 92 in National Congresses

Zi-Jiang Chen, MD,Ph.D.
Aims of the course:

• To overview the actual state of the art in gametes and embryo handling and fertility preservation
• To stimulate multidisciplinary research interactions in the field of reproductive biology in the Andean countries

The course was divided in 2 parts:

1) Clinical Program: February 27 & 28th, held in Business Tower Hotel, San Isidro – Lima.

The clinical program was locally supported by PharmaSolutions and fertility centers. There were national and international speakers. International speakers came from Canada, Portugal, UK, Switzerland, Argentina, Chile and Belgium.

One hundred and sixty professionals working on assisted reproduction attended the workshop (mostly medical doctors and practicing embryologists).

Participants provided positive comments on the quality and organization of the workshop, and actively participated in the discussions after each presentation.

2) Academic Program: March 3rd & 4th, held in Facultad de Medicina Veterinaria y Zootecnia, Universidad Peruana Cayetano Heredia.

The academic program was divided in theoretical (afternoons) and practical (mornings) sessions.

Thirty-nine participants attended this event (34 participants registered in both theoretical and practical sessions). Most of the participants were professionals and postgraduate students (among them: Biologists, Veterinarians, Medical doctors and Zootechnicians).

Two thirds of the participants came from Universities located in Lima, while one third of the participants came from Universities located in provinces.
By 1986 when the delegation from Morocco was awarded the bid for the XIII World Congress, there was a verbal contractual agreement that IFFS would receive an income of 15% of the registrations fees. Income based on this formula continued for the next three congresses and was then increased to 20% for the XVI World Congress in San Francisco. See Addendum C for a summary of actual dollar amounts. This percentage was in effect for two more congresses. However, over the preceding years it had become clear to the Executive Committee that the IFFS needed to generate a minimum of $250,000 from each congress in order to sustain three years of operational costs. These included the maintaining, on a part time basis, a Secretariat office, expanding the number of annual workshops and publishing of the Newsletter. As in the past, none of the officers or members of committees were to receive reimbursement for expenses to attend the meetings.

To ensure compliance with this stipulated minimum levy, a written legal contract was developed which was to be signed by the national society that won the bid to host the congress. The first signing of such a contract occurred during the Closing Ceremony of the XVII IFFS World Congress in Australia in 2001. The representative of the South African society that had won the bid, Paul Dahlmeier and the incoming President of IFFS, Roger Kempers both signed for the future congress in 2007.
Welcome to the land of rich heritage

NEW DELHI

22nd World Congress on Fertility & Sterility
September 2016 | Delhi, NCR

Hosted by:
Indian Fertility Society &
Indian Society for Assisted Reproduction