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J. Reproduktionsmed. Endokrinol 2010; 7 (1), 34-38

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Indexed in EMBASE/Excerpta Medica/Scopus

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Summary of the 2008 Annual Report of the German IVF Registry

M. S. Kupka¹, K. Bühler², W. Dahncke³, M. Wendelken³, M. Bals-Pratsch⁴

The German IVF Registry (Deutsches IVF-Register, D·I·R) was founded in 1982 and has since modified its data collection requirements on several occasions [1]. Since 1991, an annual report has been published, nearly all German IVF units are currently using a standardized, computer-based dataset description but are employing various software tools. These tools have undergone numerous changes. From its inception, the registry collected data by cycle. The report represents a summary of all reported cycles. Due to German legal requirements and internal procedural rules, no data related to specific centers are published [2].

The report is divided into three sections: a patient-based first section comprises responses to common questions, offering comments on the different therapeutic options. It is followed by 32 charts and tables containing the uniform analysis of all reported cycles. The third section focuses on annually varying statistics. Due to the size of the dataset, these statistics also include lifestyle aspects and regional differences. An epilogue, a comment on aspects related to the statistics and data processing, as well as a list of all participating centers have also been included.

Since 1997, > 90 % of all ART cycles reported to the system have been entered prospectively (within 7 days after the start of controlled ovarian hyperstimulation). Since 1999, participation in the registry is mandatory in some federal states of Germany and explicitly and strongly recommended in others. Compared to IVF registries of other countries, the German national registry offers more information on reproductive history like risk factors and pre-existing conditions such as hypertension, diabetes, smoking, thromboses, allergic reactions, psychiatric disorders as well as obesity. This information is given for both partners. J Reproduktionsmed Endokrinol 2010; 7 (1): 34–8.

Key words: IVF, ICSI, registry, data-collection, national, report, counseling

Introduction

The annual reports of the German IVF Registry (Deutsches IVF Register, D·I·R) are usually published in November of the year following data collection. Their presentation is part of an annual meeting of all IVF units. This conference was begun in 1986.

On average, every center is provided with information twice every year. This statistics not only focus on its own results but also include a comparison to all other IVF participants. Thus, since 1995, anonymous treatment data are sent either via internet or on a CD to the IVF Registry office, located at one of Germany’s 15 medical associations – in our case, this would have been to Schleswig-Holstein in the northern part of the country.

In 2009, the registry adopted a new legal form and created articles of incorporation.

The registry itself is an initiative based on all physicians engaged in the field of reproductive medicine of the German health system – that is, it is not supported by the government.

So, financial support is provided by the IVF units themselves and is not part of any government reimbursement system.

D·I·R participates in collecting data for the European IVF Monitoring Consortium (EIM), an organization within the European Society of Human Reproduction and Embryology (ESHRE) [3–8]. D·I·R also sends data to the International Committee Monitoring Assisted Reproductive Technologies (ICMART), which operates on a worldwide scale [9, 10].

Compared to other international and European registries, D·I·R employs a large dataset, which also collects follow-up information on the born babies.

Germany employs no social security number or other unique registration systems for individuals. D·I·R is preparing a special ID based on the so-called “DDR code” which creates an unique number out of the family name, first name, date of birth and sex. This code is only to read in one direction which means that out of the number with 8 numeric characters it is not possible to decode the person.

Results

As can be seen in Figure 1, the percentage of ICSI cycles increased rapidly in Germany as it did throughout all Europe [11]. Until 2004, government reimbursement paid 100 % for 4 treatment cycles. In that year, the reimbursement system was changed to provide only 50 % payment for three cycles. As a result of this change, there was a dramatic decrease in cycle numbers.

In 2008, a total of 71,128 cycles were reported (Fig. 2). In 1997, so-called prospective measures were introduced to the dataset. Using one of the three different software tools currently available, the treatment cycle must be recorded within 7 days of controlled ovarian stimulation.

This feature is intended to prevent cycle selection, and is one of the most power-
conclusion

Also required to provide information re-

Couples seeking infertility treatment are

loss to follow-up after one more year.

erally drops to less than 13 % loss to fol-

As for past years be sent, this figure gen-

annual report. Since the registry requests

was > 60 %. This number will be up-

the conclusion of pregnancies induced

fertility rate for all

between 11,048 IVF cycles was 30 %, com-

oocytes may only be frozen in the pro-

Because of German legal restrictions,

nuclear stage. No embryo selection is

A higher rate of multiple births (twins or

A combination of clinical pregnancy

rates and miscarriage rates allows reli-

Every year, the annual report includes

from year to year. In 2008, a summary

of all so-called “fresh cycles” related to

IVF, ICSI and IVF/ICSI treatments

was included. Half a million cycles

(509,167) over a decade-long period

were analyzed. It was shown that, up to

the eighth treatment cycle, success-rates

were analyzed. It was shown that, up to

the eighth treatment cycle, success-rates

decreased, but then began to increase

again (Fig. 4). This statistic does not re-

fect cumulative pregnancy rates.

In order to provide additional inform-

about pregnancy outcomes, the national

registry of reproductive treatments ex-

pends a great deal of effort in following

up induced pregnancies (Fig. 5). As

in other European nations, numerous

foreign couples are also treated in

Germany, making it rather difficult to

obtain information related to the out-

come of the pregnancy.

Nonetheless, the average follow-up loss

rate was less than 13 % after a maximum

follow-up period of two years.

The D·I·R data showed no significant de-

viation when compared with data for

naturally conceived single children.

Conclusion

Consumer demands for information and

clarity in the highly sensitive area of

human reproductive medicine are more

than justified [12, 13]. The success of

these forms of treatment will only be

socially acceptable and misunderstand-

ings can only be prevented after a reli-

able assessment and an open discussion

of the attainable results have been car-

ried out.

To meet this challenge, national regis-

tries in nearly every European nation

have collected and are analyzing data. In

Germany, the national registry has been

working in this area since 1982. Over the

years, the number of participating cen-

ters and registered treatments have in-

creased. Although a detailed presenta-

tion of the German IVF registry data

would already show remarkable results,

further improvement is still required.

Due to national legislative regulations,

data from various nations should only be

compared where these differences are

taken into account.

Even in different parts of a single coun-

try, results can vary due to social or eco-

nomic differences such as variations in

reimbursement systems or the availabil-

ity of professional services.

To overcome such differences, the D·I·R

has generated some statistics for a so-

called „ideal“ couple (Fig. 3).

In contrast to most of Europe’s northern

countries, Germany cannot combine

various medical data such as perinatal

information and cancer registries. Thus,

creating any follow-up statistics on in-

fant births was extremely difficult.

For the first time, this publication pro-

vides an English summation of an annual

report. In the past, some papers have al-

ready provided details regarding certain

special aspects [14, 15]. The huge data-

set which is expected to reach one mil-

Figure 1: Number of IVF/ICSI cycles in Germany (1982–2008)
Figure 2: 2008 results as related to various treatment types “still not reported”: normally, in the following year this rate drops to about 13%.
Figure 3: 2008 results for ICSI treatment and miscarriage rates by age group. Blue column: to overcome geographical differences in reimbursement systems or the availability of professional services D·I·R has generated some statistics for a so-called “ideal” couple: 2 embryos transferred and at least 2 more oocytes in the 2-PN-stage (cryo-preserved or destroyed).

Figure 4: Progression of pregnancy rates for IVF, ICSI and IVF/ICSI treatments as related to the number of treatment cycles over 10 years.

Figure 5: Pregnancy outcomes in 2008 for single children from IVF, ICSI and IVF/ICSI treatments as related to gestation periods and birth weights.
German IVF Registry

in 2010 also allows us to research specific aspects such as lifestyle factors (smoking, weight) or reproductive history (former pregnancies, miscarriages etc.).

In our opinion, the greatest advance of the German IVF Registry lies in the decision of nearly every IVF unit to support its work through a prospective data collection and through payments made to maintain the Registry files.

References:
Die meistgelesenen Artikel

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