



Women identified with Recurrent Pregnancy Loss (RPL) have Anti-Müllerian hormone (AMH) levels that are significantly lower than women without a history of RPL



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Objective

- To determine if Anti-Müllerian hormone (AMH) levels differ significantly in women with and without a history of Recurrent Pregnancy Loss (RPL).

Design

- Retrospective
- Cross-sectional study

Methods

- IRB approval was obtained
- Conducted over a 2 year period of patients seen in a Reproductive Endocrinology and Infertility (REI) private practice clinic
- Ages 26-45
- Stratified into 2 clinical groups
 - Patients with RPL (defined as 2 or more pregnancy losses)
 - Patients without RPL
- Data extracted including AMH, TSH, history of tobacco use, and BMI results
- Data was evaluated with non-pooled 2 - Sample T Test with a p-value of <0.05
- AMH values of <0.15 were entered as 0.1 for the purposes of this study

Rate of Mosaicism Detected

| | RPL (n=31) | N-RPL (n=179) | p-value |
|---------------------|-------------|---------------|---------------|
| AMH (ng/ml) | 1.39 | 4.37 | 0.0006 |
| Age | 36.5 | 33.8 | 0.052 |
| BMI | 29.8 | 32 | 0.156 |
| TSH (mIU/ml) | 1.76 | 1.87 | 0.52 |

Results

- Above table summarizes results
- Out of 220 patients identified, 31 were classified as RPL and 179 were classified as N-RPL
- AMH was significantly lower in the RPL group as compared to the N-RPL group
- Age trended towards significance when compared with the RPL and N-RPL group.
- BMI and TSH were not statistically different between these groups.

Discussion

- Low AMH is strongly correlated to RPL in this data set.
- This data may have large implications that could guide further research into the association of the granulosa cell population and successful pregnancy maintenance.
- Additionally, these findings may help physicians more effectively counsel patients on their future outlook based on AMH