



OPTIMIZATION OF THE DIAGNOSIS AND TREATMENT OF INFERTILITY ASSOCIATED WITH ENDOMETRIAL RECEPTIVITY DISORDER

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Annotation:

This article aims to optimize the diagnosis and treatment of infertility associated with endometrial receptivity disorder (ERD). It provides insight into the importance of accurate diagnosis, discusses various methods for evaluating endometrial receptivity, studies current treatments, presents research results on the optimization of birth outcomes, and concludes with suggestions for future research and clinical practice.

Keywords: endometrial receptivity disorder, infertility, diagnosis, treatment, optimization

Infertility affects many couples around the world. Endometrial receptivity disorder appears as an important contribution to implantation failure and unsuccessful assisted reproductive techniques (ART). Diagnosis and treatment of infertility associated with endometrial receptivity disorder requires accuracy and optimization to improve fertility outcomes. This article aims to explore current understanding of ERD, highlight diagnostic approaches, evaluate existing treatments, present research results on optimizing treatment strategies, and make suggestions for future advances in the field.

Infertility associated with endometrial receptivity disorder (ERD) can be difficult to diagnose and treat. However, advances in medical technology and research have led to several strategies to optimize the diagnosis and treatment of this condition. Here are some approaches that can be considered:

Correct Diagnosis:

- Histological evaluation: performing an endometrial biopsy in the implantation window to assess endometrial receptivity can provide valuable insights.
- Molecular biomarkers: identifying specific molecular markers such as gene expression patterns or protein profiles helps to more accurately determine the state of endometrial receptivity.



- Imaging techniques: the use of imaging techniques such as transvaginal ultrasound or hysteroscopy can help assess endometrial thickness, morphology and potential abnormalities.

Hormonal profiling and cycle monitoring:

- Hormonal evaluation: measuring hormone levels such as progesterone, estradiol and luteinizing hormone (LH) throughout the menstrual cycle can help assess hormonal imbalances or deficiencies that can affect endometrial receptivity.

- Cycle monitoring: regular monitoring of the menstrual cycle through ultrasound and hormonal tests can provide an appropriate time for fertility treatment.

Endometrial Preparation:

- Hormone therapy: the administration of hormonal drugs, such as estrogen and progesterone, in a certain sequence and dose, helps prepare the endometrium for the successful implantation of the embryo.

- Endometrial scratch: performing endometrial scratching, a small procedure that involves mechanical disruption of the endometrial lining can increase endometrial receptivity.

- Adjvant therapy: some studies show that additional treatments such as low-dose aspirin, antioxidants or immunomodulatory agents can improve endometrial receptivity.

Assisted reproductive techniques (ART):

- In Vitro fertilization (IVF): combining controlled ovarian stimulation, oocyte acquisition, laboratory insemination, and embryo transfer can bypass endometrial receptivity issues.

- Preimplantation genetic testing (PGT): screening embryos for chromosomal abnormalities before conducting can increase the chances of successful implantation.

- Embryoscope: the use of imaging technology over time, such as an Embryoscope, to monitor the development of the embryo, helps in the selection of the most viable embryos for transfer.

Personal Treatment:

- Personalized medicine: adapting treatment protocols based on the specific characteristics of the patient, such as age, medical history and previous treatment results can optimize the chances of success.

- Multidisciplinary approach: involving a team of fertility professionals, including reproductive endocrinologists, embryologists and geneticists, can provide comprehensive assistance and improve results.



It is important to consult a fertility specialist or reproductive endocrinologist who can assess your specific condition and recommend the most appropriate diagnostic and treatment options for infertility associated with endometrial receptivity disorders.

The diagnosis of infertility and optimization of treatment associated with endometrial receptivity disorders is a complex task. The development of molecular techniques made it possible to better understand the molecular pathways involved in endometrial receptivity. At the same time, further research is needed to create standardized diagnostic criteria and treatment protocols. Individualization of treatment plans based on the patient's unique profile can increase success rates. In addition, combining assisted reproductive techniques with targeted therapy promises to improve fertility outcomes.

Conclusions and suggestions

Optimization of the diagnosis and treatment of infertility associated with endometrial receptivity disorders requires a multidisciplinary approach. Accurate diagnosis using advanced molecular methods is critical and individual treatment plans must be tailored to individual patients. Future research should focus on developing standardized diagnostic criteria, improving treatment protocols, and studying new therapeutic targets. Collaboration between researchers, clinicians, and reproductive professionals is critical to understanding and managing endometrial receptivity disorder.

In conclusion, optimization of infertility diagnostics and treatment strategies associated with endometrial receptivity disorders has the potential to significantly improve birth outcomes. By adopting advances in molecular diagnostics, making treatment plans and exploring new therapeutic options, we can increase our ability to overcome this difficult condition and give hope to couples struggling with infertility.

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