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Dr Laxmi Shrikhande  
Dr Mamta Dighe

- 1. Is early embryo development as observed by time-lapse microscopy dependent on whether fresh or frozen sperm was used for ICSI? A cohort study.**

The aim was to compare timings of key events of embryo development from those originating from either fresh or cryopreserved ejaculate sperm using time-lapse technology. There are no differences in the morphokinetic parameters of early embryo development when either fresh or frozen ejaculate sperm are used for ICSI insemination.

[J Assist Reprod Genet.](#) 2017 Apr 29.  
[Click to read more >>https://www.ncbi.nlm.nih.gov/pubmed/28455755](https://www.ncbi.nlm.nih.gov/pubmed/28455755)
- 2. No difference in congenital anomalies prevalence irrespective of insemination methods and freezing procedure: cohort study over fourteen years of an ART population in the south of France.**

A retrospective study was conducted to evaluate and compare the prevalence of congenital anomalies in babies and fetuses conceived after four procedures of assisted reproduction technologies (ART). There is no increased risk of congenital anomalies in babies and fetuses conceived by fresh versus frozen embryo transfer after in vitro fertilization with and without micromanipulation.

[J Assist Reprod Genet.](#) 2017 Mar 23.  
[Click to read more >>https://www.ncbi.nlm.nih.gov/pubmed/28444613](https://www.ncbi.nlm.nih.gov/pubmed/28444613)
- 3. Surgery versus conservative management of endometriomas in subfertile women. A systematic review.**

Very low quality evidence suggests no difference in odds ratio of live birth between women who underwent surgery for endometriomas before IVF/ICSI compared to conservative management. Further high quality studies are needed, but due to lack of convincing evidence favoring surgery we recommend considering conservative treatment if the only indication is subfertility.

[Acta Obstet Gynecol Scand.](#) 2017 Apr 19.  
[Click to read more >>https://www.ncbi.nlm.nih.gov/pubmed/28421599](https://www.ncbi.nlm.nih.gov/pubmed/28421599)
- 4. Glucocorticoid supplementation during ovarian stimulation for IVF or ICSI.**

The safety and effectiveness of glucocorticoid administration in women undergoing controlled ovarian hyperstimulation for IVF/ICSI cycles is unclear due to the small number of studies and low event rates. Whilst glucocorticoids possible increase the clinical pregnancy rate, there may be little or no impact on live birth rate.

[Cochrane Database Syst Rev.](#) 2017 Mar 27;3:CD004752.  
[Click to read more >>https://www.ncbi.nlm.nih.gov/pubmed/28349525](https://www.ncbi.nlm.nih.gov/pubmed/28349525)
- 5. Fresh versus frozen embryo transfers in assisted reproduction.**

Study found moderate-quality evidence showing that one strategy is not superior to the other in terms of cumulative live birth rates. Time to pregnancy was not reported, but it can be assumed to be shorter using a conventional IVF/ICSI strategy in the case of similar cumulative live birth rates, as embryo transfer is delayed in a freeze-all strategy. Low-quality evidence suggests that not performing a fresh transfer lowers the OHSS risk for women at risk of OHSS.

[Cochrane Database Syst Rev.](#) 2017 Mar 28;3:CD011184.  
[Click to read more >>https://www.ncbi.nlm.nih.gov/pubmed/28349510](https://www.ncbi.nlm.nih.gov/pubmed/28349510)