

# Treatment of couples with unexplained subfertility and an unfavourable prognosis: a randomised trial comparing the effectiveness of intrauterine insemination with ovarian hyperstimulation and in-vitro fertilisation with single embryo transfer

<b>Submission date</b> 28/12/2006	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 28/12/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 14/01/2021	<b>Condition category</b> Pregnancy and Childbirth	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

Not provided at time of registration

## Contact information

### Type(s)

Scientific

### Contact name

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### Contact details

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## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**

NL811, NTR824

## **Study information**

### **Scientific Title**

Treatment of couples with unexplained subfertility and an unfavourable prognosis: a randomised trial comparing the effectiveness of intrauterine insemination with ovarian hyperstimulation and in-vitro fertilisation with single embryo transfer

### **Acronym**

SETI-study (Single Embryo Transfer or IUI)

### **Study objectives**

One cycle of In-Vitro Fertilisation-elective Single Embryo Transfer (IVF-eSET) followed by transfer of frozen embryos is at least as effective as three cycles of Intra-Uterine Insemination-Controlled Ovarian Hyperstimulation (IUI-COH) in terms of ongoing pregnancy. Multiple pregnancies however can largely be prevented by treating women with IVF-eSET.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Approval received from the ethics board of the Academic Medical Centre Amsterdam on March 6th 2006 (reference number: MEC 294).

### **Study design**

Randomised, controlled, parallel group multicentre trial

### **Primary study design**

Interventional

### **Secondary study design**

Randomised controlled trial

### **Study setting(s)**

Not specified

### **Study type(s)**

Treatment

### **Participant information sheet**

### **Health condition(s) or problem(s) studied**

## Unexplained Subfertility

### Interventions

Comparison of IVF in a long protocol with elective Single Embryo Transfer, and IUI-COH, in couples with unexplained or mild male subfertility and poor fertility prospects.

### Intervention Type

Other

### Phase

Not Specified

### Primary outcome measure

Ongoing pregnancy defined as registered heartbeat on ultrasound beyond 12 weeks of gestation.

### Secondary outcome measures

1. Multiple pregnancy, defined as registered heartbeat of at least two foetuses at 12 weeks of gestation
2. Clinical pregnancy, defined as any registered embryonic heartbeat at sonography
3. Live birth, defined as the birth of at least one living child
4. Pregnancy complications (preterm birth less than 37 weeks, birth weight less than 2.5 gram, Pregnancy Induced Hypertension (PIH), (pre-) eclampsia, Haemolysis, Elevated Liver, Low Platelet [HELLP])

### Overall study start date

01/06/2006

### Completion date

01/06/2008

## Eligibility

### Key inclusion criteria

1. Female age between 18 and 36 years
2. Couples must be diagnosed with unexplained subfertility, defined as normal semen (pre-wash total motile sperm count of at least 40 million), spontaneous ovulatory cycle and patent Fallopian tubes, or with mild male subfertility, defined as a post-wash total motile sperm count above three million
3. The couple has poor fertility prospects as calculated by the validated model of Hunault. A poor fertility prospect is defined as a chance of spontaneous pregnancy below 30% within 12 months

### Participant type(s)

Patient

### Age group

Adult

### Lower age limit

18 Years

**Sex**

Female

**Target number of participants**

100

**Total final enrolment**

116

**Key exclusion criteria**

1. Polycystic ovary syndrome
2. Endocrinopathological disease like: Cushing syndrome, adrenal hyperplasia, hyperprolactinemia, acromegaly, imminent ovarian failure, premature ovarian failure, hypothalamic amenorrhea, hypothyroidy, diabetes mellitus type I
3. If not willing or able to sign the consent form

**Date of first enrolment**

01/06/2006

**Date of final enrolment**

01/06/2008

## **Locations**

**Countries of recruitment**

Netherlands

**Study participating centre**

**Academic Medical Center (AMC)**

Amsterdam

Netherlands

1100 DD

## **Sponsor information**

**Organisation**

Academic Medical Center (AMC) (The Netherlands)

**Sponsor details**

P.O. Box 22660

Amsterdam

Netherlands

1100 DD

**Sponsor type**

Hospital/treatment centre

**Website**

<http://www.amc.uva.nl/#http://www.amc.uva.nl/>

**ROR**

<https://ror.org/03t4gr691>

## Funder(s)

**Funder type**

Industry

**Funder Name**

Organon (The Netherlands)

## Results and Publications

**Publication and dissemination plan**

Not provided at time of registration

**Intention to publish date****Individual participant data (IPD) sharing plan****IPD sharing plan summary**

Not provided at time of registration

**Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/11/2011	14/01/2021	Yes	No