ISRCTN17249800 https://doi.org/10.1186/ISRCTN17249800

Does a treatment for pelvic congestion syndrome affect future fertility? A study measuring hormone levels before and after ovarian vein embolization

Submission date
08/04/2026

Recruitment status
No longer recruiting

Registration date
09/04/2026

Overall study status
Ongoing

Last Edited
09/04/2026

Condition category
Urological and Genital Diseases

[_] Prospectively registered
[_] Protocol
[_] Statistical analysis plan
[_] Results
[_] Individual participant data
[X] Record updated in last year

Plain English summary of protocol

Background and study aims

Pelvic congestion syndrome is a condition that can cause long term pelvic pain in women. It is linked to abnormal blood flow in the pelvic veins. One common treatment is ovarian vein embolization. This is a minimally invasive procedure that blocks the problem veins. While this treatment can reduce pain, there is limited information about whether it affects future fertility. This study aims to find out whether ovarian vein embolization changes ovarian function by measuring levels of a hormone linked to fertility before and after treatment.

Who can participate?

Women aged between 21 years and 45 years who have been diagnosed with pelvic congestion syndrome and are suitable for ovarian vein embolization can take part. Women who have had previous ovarian surgery or removal of an ovary cannot participate.

What does the study involve?

Participants receive ovarian vein embolization as part of their usual medical care. Blood samples are taken before the procedure and again at 1 month and 6 months after treatment. These samples are used to measure a hormone called anti-Müllerian hormone, which gives information about ovarian reserve. Participants also attend follow up visits so doctors can check whether pelvic pain symptoms have improved.

What are the possible benefits and risks of participating?

Participants may benefit from improvement in pelvic pain following treatment. Taking part also helps improve understanding of how this treatment might affect fertility, which may help future patients. The risks are the same as for standard ovarian vein embolization and blood tests. These may include discomfort, bruising, or rare procedure related complications. No extra risks are expected from taking part in the study itself.

Where is the study run from?
The study is run from Başakşehir Çam and Sakura City Hospital in Istanbul, Türkiye.

When is the study starting and how long is it expected to run for?
April 2023 to August 2026.

Who is funding the study?
Investigator initiated and funded

Who is the main contact?
Dr Ali Dablan, alidablan.dr@gmail.com

Contact information

Type(s)
Scientific, Public, Principal investigator

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Additional identifiers

Study information

Scientific Title
Prospective evaluation of reproductive safety after ovarian vein embolization for pelvic congestion syndrome using anti-Müllerian hormone levels

Study objectives
Primary objective:
To evaluate the effect of ovarian vein embolization on ovarian reserve by comparing serum anti-Müllerian hormone (AMH) levels at baseline (pre-procedure) and at 1 and 6 months after the procedure in patients with pelvic congestion syndrome.

Secondary objectives:
To assess clinical symptom improvement following treatment and to explore the relationship between changes in AMH levels and clinical outcomes.

Ethics approval required

Ethics approval required

Ethics approval(s)
approved 05/04/2023, Ethics Committee of Başakşehir Çam and Sakura City Hospital (Başakşehir Mahallesi G-434 Caddesi No: 2L Başakşehir, İSTANBUL, 34488, Türkiye; +90 212 909 60 00; basaksehircamsakuraetikkurul@gmail.com), ref: 153

Primary study design
Interventional

Allocation
N/A: single arm study

Masking
Open (masking not used)

Control
Uncontrolled

Assignment
Single

Purpose
Treatment

Study type(s)

Health condition(s) or problem(s) studied
Pelvic congestion syndrome (chronic pelvic pain of venous origin)

Interventions
All patients underwent ovarian vein embolization for the treatment of pelvic congestion syndrome using standard interventional radiology techniques. The procedure was performed via femoral venous access with selective catheterization of the ovarian veins. Embolization was achieved using a combination of sclerotherapy, coil embolization, and liquid embolic agents (n-butyl cyanoacrylate–Lipiodol mixture) according to procedural requirements.

Serum anti-Müllerian hormone (AMH) levels were measured prior to the procedure and at 1-month and 6-month follow-up. Clinical evaluation was also performed to assess symptom improvement after treatment. All data were collected prospectively using a standardized protocol.

Intervention Type
Procedure/Surgery

Primary outcome(s)
1. Serum anti-Müllerian hormone (AMH) levels measured using venous blood samples using standardized laboratory immunoassays at pre-procedure (baseline), and at 1-month and 6-month follow-up after ovarian vein embolization

Key secondary outcome(s))

Completion date
03/08/2026

Eligibility

Key inclusion criteria
Female patients aged 21–45 years with a diagnosis of pelvic congestion syndrome and an established indication for ovarian vein embolization

Healthy volunteers allowed
No

Age group
Adult

Lower age limit
21 years

Upper age limit
45 years

Sex
Female

Total final enrolment
24

Key exclusion criteria
1. History of ovarian surgery
2. Prior oophorectomy
3. Age outside 21–45 years

Date of first enrolment
06/04/2023

Date of final enrolment
02/02/2026

Locations

Countries of recruitment
Türkiye

Sponsor information

Organisation
Başakşehir Çam and Sakura City Hospital

Funder(s)

Funder type

Funder Name
Investigator initiated and funded

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary
Not expected to be made available