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Endometrial receptivity after oocyte donation in recipients with a history of chemotherapy and/or radiotherapy.

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INTRODUCTION: Information is scarce regarding the outcome of oocyte donation (OD) in patients with a history of cancer treatment. Therefore, we conducted a matched controlled analysis on the outcome of OD in these recipients. METHODS: Between January 2000 and November 2005, 33 patients with a history of chemotherapy and/or radiotherapy had an OD cycle. Matching was performed to the chronologically closest patient without a history of cancer therapy by number of days of hormonal stimulation before embryo replacement, number of replaced embryos, day of embryo transfer and origin of sperm. RESULTS: The primary diseases of the patients were Hodgkin's lymphoma (n = 12), non-Hodgkin's lymphoma (n = 3), leukaemia (n = 7), ovarian cancer (n = 6), Ewing's sarcoma (n = 2), breast cancer (n = 1), sympathoblastoma (n = 1) and histiocytosis X (n = 1). Twenty-three patients had undergone chemotherapy and radiotherapy, nine patients chemotherapy only and one radiotherapy only. The mean age of the recipients was 33.1 years [95% confidence interval (CI) 30.9-35.3] and 39.6 (95% CI 37.1-42.1) in the study and control groups, respectively. The average number of received oocytes and transferred embryos, was similar in both groups. Nineteen (57.6%) versus 13 (39.4%) pregnancies resulting in an ongoing pregnancy (i.e. viable at 12 weeks) in 15 (45.4%) versus 9 cycles (27.3%) (NS) were obtained in study and control groups, respectively. Implantation rate in study and control groups was 35.8 versus 17.9%, respectively (P = 0.02). CONCLUSIONS: The results suggest that patients with a history of cancer treatment have a pregnancy rate after OD similar to that in the general population of oocyte recipients.

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