

# *How Infertility and Treatments Can Affect Human Placenta Function*



*Margareta D. Pisarska, M.D.*

*Director, Division of Reproductive Endocrinology and Infertility*

*Director, Center for Reproductive Medicine*

*Professor, Cedars-Sinai Medical Center*

*David Geffen School of Medicine at UCLA*

# *Disclosures*

- *Ferring*
- *Natara*

# Infertility And Treatment Options

*Infertility affects up to 15% of couples*



## Ovarian Stimulation/IUI



4.6% live births in US

## In Vitro Fertilization



1.9% live births in US

8 million babies born worldwide

# Outcomes based on fertility diagnosis

- Significant difference in maternal age and race
- Infertility increases risk for cesarean section
- Conceptions from infertile couples deliver earlier



	Infertile N=277	Fertile N=3016	P-value
Maternal Age, years	37.4±5.3	31.5±5.3	<0.0001
Maternal Race, n(%)			0.023
White	193 (69.9)	2066 (68.8)	
Black- or African-American	16 (15.8)	287 (9.6)	
Asian or Asian-American	49 (17.8)	391 (13.0)	
Other	18 (6.5)	260 (8.7)	
BMI, kg/m <sup>2</sup>	23.3±4.6	23.0±4.6	0.3211
Mode of Conception, n(%)			<0.0001
IVF	136 (49.1)	4 (0.13)	
NIFT	73 (26.4)	4 (0.13)	
Presumed Spontaneous	68 (24.5)	3008 (99.7)	
Cesarean Delivery, n(%)	142 (51.8)	1078 (36.1)	<0.001
Gestational age, weeks	38.9±2.3	39.4±1.7	<0.0001
Birth weight, grams <sup>c</sup>	3268±634	3317±510	0.1378



- ART were significantly older
- More likely to be white
- More likely to be nulliparous
- Significantly increased risk for cesarean delivery
- Risk of retained placenta was also significantly higher

TABLE 1

Maternal characteristics and maternal and fetal outcomes in singleton gestations conceived either spontaneously or with assisted reproductive technology (ART).

Variable	Spontaneous (n = 193)	ART (n = 185)	P value
Maternal characteristic			
Age (y), mean	45.6 ± 0.1	47.0 ± 2.3	<.05
Race/ethnicity, % white	75.6	88.1	<.002
Parity	1.2 ± 1.8	0.4 ± 0.9	<.001
Maternal outcome			
Postpartum hemorrhage, %	3.1	5.9	NS
Estimated blood loss (mL)			
Vaginal delivery	303 ± 104	324 ± 116	NS
Cesarean delivery	730 ± 284	713 ± 137	NS
Retained placenta, %	0	2.7	<.02
Transfusion, %	2.1	1.1	NS
Hysterectomy, %	0	0.5	NS
Rate of ICU admission, %	0	1.1	NS
Length of stay (d), mean	3.2 ± 2.2	4.2 ± 3.9	<.01
Total CD, %	49.7	75.1	<.001
Primary CD	35.3	71.3	
Repeat CD	22.2	13.5	
Fetal outcome			
Gestational age, wk	38.9 ± 2.4	38.9 ± 2.4	NS
Birth weight, g	3,318 ± 527	3,284 ± 567	NS
NICU admission rate, %	1.5	4.3	NS
Apgar score at 5 min	8.8 ± 1	8.9 ± 0.7	NS

Note: CD = cesarean delivery; ICU = intensive care unit; NICU = neonatal intensive care unit; NS = not significant.

Jackson. Pregnancy in very advanced maternal age. Fertil Steril 2015.

# Risks associated with infertility and fertility treatments

	spontaneous	NIFT	IVF
gestational diabetes		↑	↑
pregnancy induced hypertension		↑	↑
placenta previa			↑
placental abruption		↑	↑
postpartum hemorrhage			↑
preterm birth			↑
Low birth weight/SGA		↑	↑
perinatal mortality		↑	↑

# Significant maternal morbidity

**Table 2.** Rates of Most Commonly Reported and Statistically Significant Severe Maternal Morbidity Indicators and Overall Rate of Any Indicator During Delivery Hospitalizations or Postpartum Readmissions Per 10,000 Deliveries by Assisted Reproductive Technology Status, 2008–2012

Indicator	Singleton Pregnancies			Multiple Pregnancies		
	Non-ART	ART	<i>P</i> *	Non-ART	ART	<i>P</i> *
Blood transfusion	36	77	<.001	215	200	.567
Disseminated intravascular coagulation	20	46	<.001	68	98	.042
Mechanical ventilation	18	33	.001	105	143	.034
Adult respiratory distress syndrome	12	21	.009	49	48	1
Eclampsia	11	13	.656	34	41	.488
Heart failure during procedure or surgery	11	23	.001	26	25	1
Hysterectomy	9	27	<.001	38	34	.892
Sepsis	7	15	.004	22	32	.227
Acute renal failure	6	18	<.001	30	32	.881
Puerperal cerebrovascular disorders	6	9	.324	19	18	1
Operations on heart and pericardium	6	12	.041	21	23	.720
Internal injuries of thorax, abdomen, and pelvis	3	14	<.001	10	25	.018
Shock	4	14	<.001	22	16	.585
<b>Overall</b>	<b>126</b>	<b>273</b>	<b>&lt;.001</b>	<b>539</b>	<b>604</b>	<b>.089</b>

ART, assisted reproductive technology.

Data are n unless otherwise specified.

\* Holm-Bonferroni corrected  $P \leq .001$  denotes statistical significance of Pearson  $\chi^2$  and Fisher exact tests.

# Significant Maternal Morbidity (SMM)

- Using Gold Standard guidelines true SMM cases (Complications)

- hemorrhage
- hypertension/neurologic
- renal, sepsis
- pulmonary, cardiac ICU/invasive monitoring
- surgical, bladder, and bowel
- Anesthesia

- Higher rate of women utilizing fertility treatment that has significant maternal morbidity

**TABLE 1**

Baseline characteristics of the maternal cohort.

Characteristic	SMM (n = 69)	No SMM (n = 6,474)	P value
Maternal age (y), n (SD)	34.0 (6.7)	32.9 (5.30)	.18
Maternal race			.001
White	36 (52.2)	4,541 (70.5)	
Black	14 (20.3)	590 (9.2)	
Asian	14 (20.3)	798 (12.4)	
Other	5 (7.3)	512 (8.0)	
Body mass index (kg/m <sup>2</sup> )			.50
18.5–24.9	9 (13.6)	1,220 (18.9)	
25–29.9	29 (43.9)	3,021 (46.8)	
≥30	28 (42.4)	2,012 (34.3)	
Multifetal pregnancy	7 (10.1)	159 (2.5)	< .001
Mode of conception			.004
IVF	7 (10.1)	239 (3.7)	
NIFT	3 (4.4)	106 (1.6)	
Spontaneous	59 (85.5)	6,129 (94.7)	
Preterm delivery (<37 wk)	25 (36.8)	470 (7.4)	< .001
Cesarean delivery	55 (79.7)	2,338 (36.1)	< .001
Health insurance			< .001
Government	20 (29)	831 (13)	
Private	49 (71)	5,583 (87)	
Comorbidities			
Coronary heart disease	5 (7)	26 (0.4)	< .001
Diabetes mellitus	10 (15)	455 (7)	0.03
Hypertension	3 (4)	57 (1)	0.03

Note: Data presented as n (%), unless stated otherwise. IVF = in vitro fertilization; NIFT = non-IVF fertility treatment; SMM = severe maternal morbidity.

Wang. Fertility treatment and SMM. Fertil Steril 2016.

# Infertility Diagnosis and Maternal Morbidity

- Insurance Claims Database
- Fertile  $n=525,695$
- Infertile  $n=19,658$
- **Any severe maternal morbidity including the morbidities noted were associated with the diagnosis of infertility independent of treatment**

TABLE 3

Risk of severe maternal morbidity by fertility group<sup>a</sup>



Severe maternal morbidity indicator	AOR (95% CI)			
	Infertile			
	Treatment vs fertile	Diagnosis vs fertile	Testing vs fertile	All infertile vs fertile
Any severe maternal morbidity indicator	1.24 (1.12–1.37)	1.22 (1.13–1.33)	1.09 (0.81–1.45)	1.22 (1.14–1.31)
Acute myocardial infarction	1.68 (0.52–5.46)	0.90 (0.22–3.69)	<sup>b</sup>	1.33 (0.52–3.36)
Acute renal failure	1.03 (0.53–2.02)	0.86 (0.47–1.57)	<sup>b</sup>	0.84 (0.51–1.38)
Acute respiratory distress	1.57 (1.03–2.38)	1.14 (0.76–1.71)	<sup>b</sup>	1.26 (0.93–1.70)
Amniotic fluid embolism	1.61 (0.50–5.18)	1.10 (0.35–3.49)	<sup>b</sup>	1.31 (0.57–3.02)
Aneurysm	<sup>b</sup>	<sup>b</sup>	<sup>b</sup>	<sup>b</sup>
Cardiac arrest or ventricular fibrillation	1.22 (0.29–5.04)	2.68 (1.16–6.20)	<sup>b</sup>	1.94 (0.88–4.31)
Disseminated intravascular coagulation	1.67 (1.33–2.09)	1.34 (1.08–1.66)	1.57 (0.81–3.04)	1.48 (1.26–1.73)
Eclampsia	1.49 (1.02–2.17)	1.30 (0.95–1.79)	0.41 (0.06–2.91)	1.37 (1.05–1.79)
Heart failure during procedure or surgery	1.27 (0.85–1.91)	1.75 (1.3–2.36)	0.89 (0.22–3.57)	1.54 (1.21–1.97)
Internal injuries of the thorax, abdomen, or pelvis	1.61 (0.92–2.84)	1.52 (0.95–2.45)	0.99 (0.14–7.08)	1.77 (1.20–2.61)
Intracranial injuries	1.27 (0.31–5.28)	2.64 (1.14–6.10)	<sup>b</sup>	2.05 (0.97–4.32)
Puerperal cardiovascular disorders	1.05 (0.77–1.43)	1.41 (1.13–1.75)	1.65 (0.81–3.35)	0.94 (0.66–1.33)
Pulmonary edema	1.85 (1.09–3.14)	2.05 (1.36–3.08)	<sup>b</sup>	2.18 (1.54–3.10)
Severe anesthesia complications	0.33 (0.08–1.35)	0.85 (0.42–1.71)	<sup>b</sup>	1.13 (0.49–2.60)
Sepsis	1.04 (0.58–1.85)	0.70 (0.40–1.21)	1.37 (0.34–5.51)	0.90 (0.59–1.36)
Shock	1.76 (1.02–3.05)	1.06 (0.58–1.93)	<sup>b</sup>	1.14 (0.72–1.80)
Sickle cell anemia with crisis	<sup>b</sup>	<sup>b</sup>	<sup>b</sup>	<sup>b</sup>
Thrombotic embolism	1.35 (0.86–2.13)	1.77 (1.27–2.49)	1.21 (0.30–4.88)	1.58 (1.14–2.17)
Blood transfusion	1.69 (1.39–2.07)	1.30 (1.08–1.56)	1.44 (0.79–2.62)	1.50 (1.30–1.72)
Cardiology monitoring	1.01 (0.87–1.18)	1.14 (1.02–1.27)	0.83 (0.53–1.29)	1.09 (0.997–1.20)
Conversion of cardiac rhythm	0.72 (0.10–5.29)	0.95 (0.23–3.88)	<sup>b</sup>	0.83 (0.26–2.68)
Hysterectomy	1.61 (1.03–2.52)	1.10 (0.69–1.77)	1.53 (0.38–6.16)	1.35 (0.97–1.88)
Operations on the heart and pericardium	1.44 (0.86–2.39)	1.09 (0.67–1.77)	2.23 (0.72–6.96)	1.12 (0.77–1.64)
Temporary tracheostomy	<sup>b</sup>	<sup>b</sup>	<sup>b</sup>	<sup>b</sup>
Ventilation	0.95 (0.61–1.47)	1.08 (0.78–1.51)	<sup>b</sup>	0.91 (0.69–1.20)
Intubation	0.92 (0.29–2.92)	0.98 (0.40–2.39)	<sup>b</sup>	0.84 (0.39–1.80)

AOR, adjusted odds ratio; CI, confidence interval.

<sup>a</sup> A generalized estimating equation (GEE) model was used to estimate the odds ratios of the diseases between infertile and control groups, adjusted for maternal age, year of delivery, nulliparity, delivery mode, preterm birth, obesity, smoking, hypertension, diabetes, number of prenatal visits, race and ethnicity, and education, accounting for women who had more than 1 delivery of a singleton during the database enrollment period. <sup>b</sup> Calculation of AOR and 95% CI was not possible because of small numbers.

Murugappan et al. Maternal morbidity among infertile women. Am J Obstet Gynecol 2020.

# Preterm, late preterm, early term, and term deliveries between infertile and fertile women

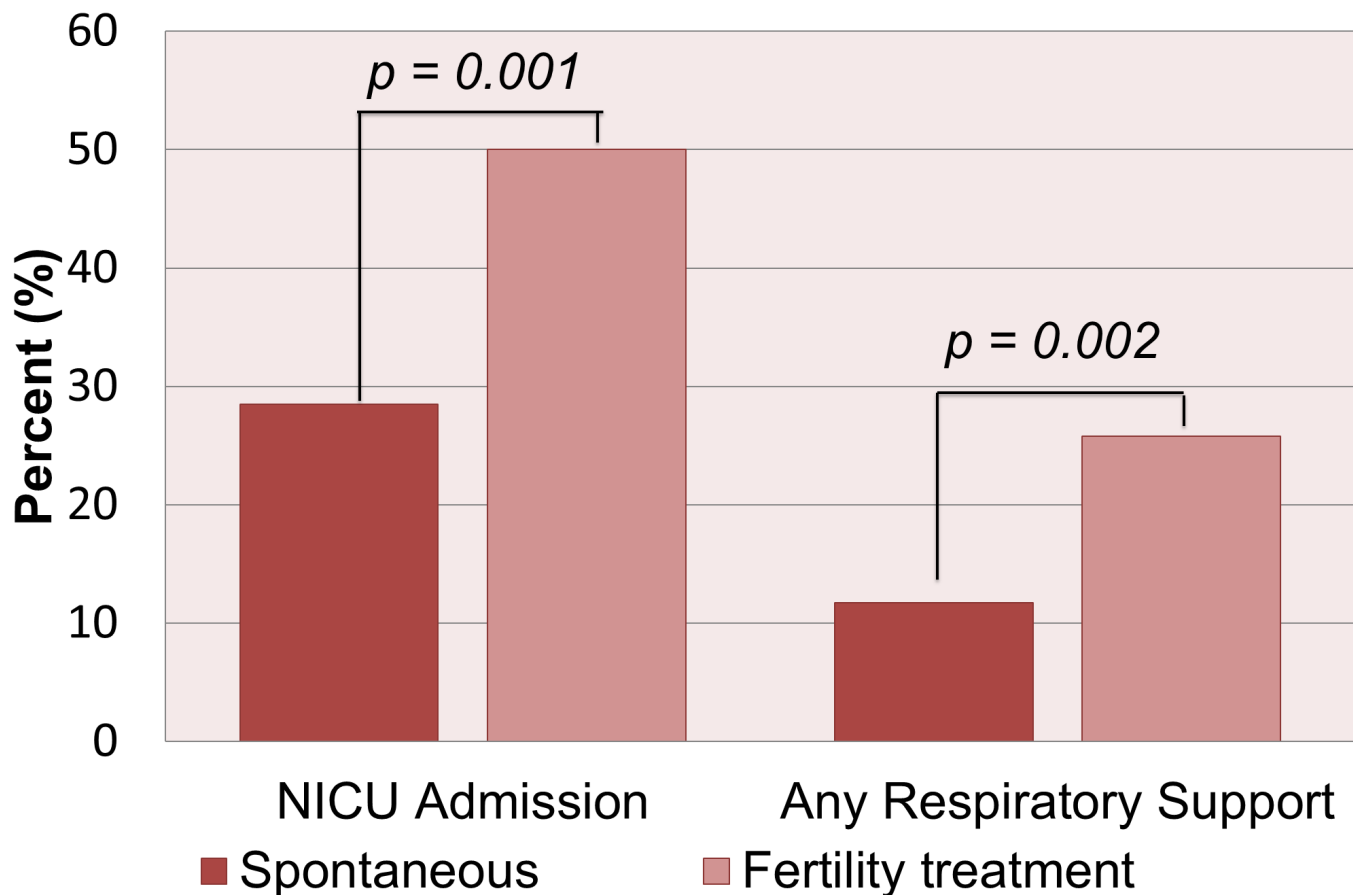
	<b>Infertile</b> <b>N=277</b>	<b>Fertile</b> <b>N=3016</b>	<b>P value</b>
 <b>&lt;34 weeks</b>	8 (2.9)	39 (1.3)	0.032 <sup>1</sup>
 <b>34-36 6/7 weeks</b>	23 (8.3)	130 (4.3)	0.003 <sup>2</sup>
<b>37-38 6/7 weeks</b>	58 (20.9)	536 (17.8)	0.19 <sup>3</sup>
<b>≥39 weeks</b>	188 (67.9)	2311(76.6)	0.001 <sup>4</sup>

Adjusted for maternal age and race



# Late preterm infants (34 0/7 to 36 6/7 weeks)

Figure 1: NICU Admission and Respiratory Outcomes



continuous positive airway pressure [CPAP]  
intermittent mechanical ventilation [IMV])

**Table 4. Odds Ratio for Any Birth Defects According to Type of Assisted Conception and Multiplicity.\***

Type of Assisted Conception	Defect <i>no. of births with defect/ total no. of births</i>	Singleton Births	
		Unadjusted Odds Ratio	Adjusted Odds Ratio†
Any	361/4333	1.45 (1.30–1.63)	1.28 (1.14–1.43)
IVF			
Fresh- or frozen-embryo cycles	105/1484	1.25 (1.02–1.52)	1.06 (0.87–1.30) ←
Fresh-embryo cycles	71/1005	1.25 (0.98–1.59)	1.05 (0.82–1.35)
Frozen-embryo cycles	34/479	1.24 (0.88–1.76)	1.08 (0.76–1.53)
ICSI			
Fresh- or frozen-embryo cycles	91/939	1.72 (1.38–2.15)	1.55 (1.24–1.94) ←
Fresh-embryo cycles	76/713	1.95 (1.53–2.48)	1.73 (1.35–2.21)
Frozen-embryo cycles	15/226	1.17 (0.70–1.97)	1.10 (0.65–1.85)
GIFT	34/319	1.98 (1.40–2.80)	1.73 (1.21–2.47)
Intrauterine insemination	54/580	1.67 (1.25–2.23)	1.46 (1.09–1.95)
Donor insemination	36/428	1.51 (1.08–2.11)	1.37 (0.98–1.92)
Ovulation induction	19/306	1.08 (0.68–1.74)	0.99 (0.62–1.59)
Clomiphene citrate at home	7/36	3.87 (1.58–9.51)	3.19 (1.32–7.69) ←
Other‡	15/241	1.07 (0.63–1.82)	0.96 (0.56–1.63)
Spontaneous conception after previous birth from assisted reproductive technology	96/1306	1.27 (1.02–1.59)	1.26 (1.01–1.57)
Infertile but no history of treatment with assisted reproductive technology	52/600	1.54 (1.15–2.05)	1.37 (1.02–1.83) ←
No use of assisted reproductive technology and fertile	16,841/293,314	1.00	1.00

# Risks of Birth Defects

**Table III Risk of birth defects among singletons by maternal characteristics and mode of conception.\***

Group***		Major birth defect**		Blastogenesis		Cardiovascular		Musculoskeletal		Genitourinary-male		Chromosomal		Any birth defect	
		AOR	95% CI	AOR	95% CI	AOR	95% CI	AOR	95% CI	AOR	95% CI	AOR	95% CI	AOR	95% CI
Group***	Naturally conceived	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference
	OI/IIUI conceived	1.16	0.97, 1.38	1.11	0.66, 1.85	0.96	0.74, 1.24	1.29	0.86, 1.94	1.25	0.90, 1.73	1.00	0.60, 1.68	1.12	0.99, 1.26
	ART siblings	1.08	0.98, 1.19	1.19	0.90, 1.58	1.10	0.96, 1.26	<b>1.32</b>	<b>1.04, 1.67</b>	0.96	0.78, 1.19	0.94	0.69, 1.27	<b>1.15</b>	<b>1.08, 1.23</b>
	ART-auto-fresh, no ICSI	<b>1.18</b>	<b>1.05, 1.32</b>	0.99	0.69, 1.42	<b>1.20</b>	<b>1.03, 1.40</b>	1.19	0.89, 1.57	1.11	0.88, 1.41	0.65	0.44, 0.95	<b>1.18</b>	<b>1.09, 1.27</b>
	ART-auto-fresh, yes ICSI-no MF	<b>1.30</b>	<b>1.16, 1.45</b>	<b>1.49</b>	<b>1.08, 2.05</b>	<b>1.28</b>	<b>1.10, 1.48</b>	<b>1.34</b>	<b>1.01, 1.78</b>	1.09	0.85, 1.39	0.89	0.63, 1.26	<b>1.22</b>	<b>1.13, 1.32</b>
	ART-auto-fresh, yes ICSI-yes MF	<b>1.42</b>	<b>1.28, 1.57</b>	<b>1.56</b>	<b>1.17, 2.08</b>	<b>1.45</b>	<b>1.27, 1.66</b>	1.25	0.96, 1.64	<b>1.33</b>	<b>1.08, 1.65</b>	0.93	0.66, 1.33	<b>1.38</b>	<b>1.29, 1.48</b>
Maternal Age (years)	18–29	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference
	30–34	<b>1.09</b>	<b>1.05, 1.12</b>	0.92	0.83, 1.02	<b>1.17</b>	<b>1.11, 1.23</b>	0.97	0.89, 1.06	1.08	1.00, 1.17	<b>1.76</b>	<b>1.52, 2.03</b>	<b>1.07</b>	<b>1.05, 1.10</b>
	35–37	<b>1.11</b>	<b>1.06, 1.16</b>	0.83	0.72, 0.96	<b>1.34</b>	<b>1.26, 1.43</b>	0.91	0.81, 1.04	1.11	1.00, 1.23	<b>3.46</b>	<b>2.95, 4.05</b>	<b>1.13</b>	<b>1.10, 1.17</b>
	38–40	<b>1.10</b>	<b>1.03, 1.17</b>	0.96	0.80, 1.14	<b>1.52</b>	<b>1.40, 1.64</b>	0.97	0.83, 1.14	1.03	0.90, 1.18	<b>6.79</b>	<b>5.800, 7.96</b>	<b>1.23</b>	<b>1.18, 1.28</b>
	41–43	<b>1.13</b>	<b>1.03, 1.24</b>	1.10	0.85, 1.43	<b>1.77</b>	<b>1.59, 1.97</b>	1.12	0.89, 1.42	1.19	0.98, 1.45	<b>15.4</b>	<b>12.99, 18.25</b>	<b>1.42</b>	<b>1.34, 1.51</b>
	≥44	<b>1.30</b>	<b>1.07, 1.59</b>	<b>1.80</b>	<b>1.12, 2.88</b>	<b>2.58</b>	<b>2.11, 3.16</b>	1.42	0.89, 2.26	1.32	0.87, 2.00	<b>28.7</b>	<b>22.47, 36.67</b>	<b>1.68</b>	<b>1.49, 1.90</b>
BMI (kg/m <sup>2</sup> )	12–24	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference
	25–29	1.01	0.97, 1.06	1.00	0.88, 1.14	1.03	0.96, 1.09	1.04	0.93, 1.17	0.99	0.89, 1.09	1.10	0.94, 1.30	1.00	0.97, 1.04
	30–59	<b>1.18</b>	<b>1.12, 1.24</b>	1.10	0.96, 1.26	<b>1.23</b>	<b>1.16, 1.31</b>	<b>1.25</b>	<b>1.11, 1.41</b>	0.96	0.86, 1.08	1.09	0.92, 1.29	<b>1.13</b>	<b>1.10, 1.17</b>
Diabetes	None	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference
	Pre- or gestational	<b>1.34</b>	<b>1.27, 1.41</b>	<b>1.46</b>	<b>1.25, 1.69</b>	<b>1.47</b>	<b>1.37, 1.57</b>	1.05	0.90, 1.22	<b>1.14</b>	<b>1.01, 1.30</b>	1.11	0.93, 1.32	<b>1.26</b>	<b>1.21, 1.30</b>
Hypertension	None	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference
	Pre- or gestational	<b>1.43</b>	<b>1.36, 1.51</b>	1.13	0.96, 1.33	<b>1.49</b>	<b>1.40, 1.60</b>	1.04	0.90, 1.21	<b>1.71</b>	<b>1.54, 1.91</b>	1.00	0.83, 1.21	<b>1.34</b>	<b>1.29, 1.39</b>
Infant sex	Female	1.00	Reference	1.00	Reference	1.00	Reference	1.00	Reference	–	–	1.00	Reference	1.00	Reference
	Male	<b>1.53</b>	<b>1.49, 1.58</b>	<b>1.17</b>	<b>1.08, 1.27</b>	0.96	0.92, 1.00	<b>1.44</b>	<b>1.34, 1.54</b>	–	–	1.01	0.92, 1.11	<b>1.55</b>	<b>1.52, 1.58</b>

\*Models adjusted for all factors listed above, as well as maternal race and ethnicity, education, parity, and State and year of birth. ART births limited to autologous-fresh with partner ejaculated sperm. Bolded values are significantly increased.  
 \*\*Major defects are limited to nonchromosomal only.  
 \*\*\*Group (n, children): naturally conceived (1 066 652); OI/IIUI conceived (6899); non-ART siblings (22 821); ART-auto-fresh, no ICSI (all infertility diagnoses, no ICSI: 16 433); ART-auto-fresh, yes ICSI-no MF (yes ICSI, no male factor diagnosis: 14 071); ART-auto-fresh, yes ICSI-yes MF (yes ICSI, yes male factor diagnosis: 16 629). AOR, adjusted odds ratio.  
 Major birth defects as defined by the National Birth Defects Prevention Network (NBDPN) (see Supplementary Table S1).  
 Any birth defect is any ICD-9 code with the first 3 digits 740–759, and any ICD-10 code inclusive of Q00.0–07.9, 10–18.9, 20–28.9, 30–45.9, 50–56.4, 60–87.89 and 89–99.9.

# Risk Assessment

- *Despite increased risk of adverse outcomes, the overall incidence and relative risk of these outcomes is low.*

**Table 1. Risks Associated With In Vitro Fertilization–Conceived Pregnancies Compared With Naturally Conceived Counterparts—Singleton, Twin, and Nonstratified Gestations**

Risk	Absolute Risk
Among singleton pregnancies	
Preterm delivery <sup>50</sup>	Half day earlier IVF–ICSI vs SC 9.7% IVF–ICSI vs 7.9% SC
Low birth weight delivery <sup>50</sup>	33 g less IVF–ICSI vs SC
Severe maternal morbidity (blood transfusion most common) <sup>63</sup>	6.8% IVF–ICSI vs 4.9% SC 273/10,000 IVF–ICSI vs 126/10,000 SC
Among twin pregnancies	
Monozygotic twins <sup>31,32</sup>	1.2–2.5% IVF–ICSI vs 0.4% SC
Preterm delivery <sup>26–28</sup>	Comparable
Low birth weight delivery <sup>26–28</sup>	Comparable
Not stratified	
DNA methylation <sup>71,72</sup>	Comparable
Imprinting disorder <sup>71,72</sup>	0.15% IVF–ICSI vs 0.02% SC
Any cardiac defect including ASD, VSD <sup>70</sup>	1.30% IVF–ICSI vs 0.68% SC

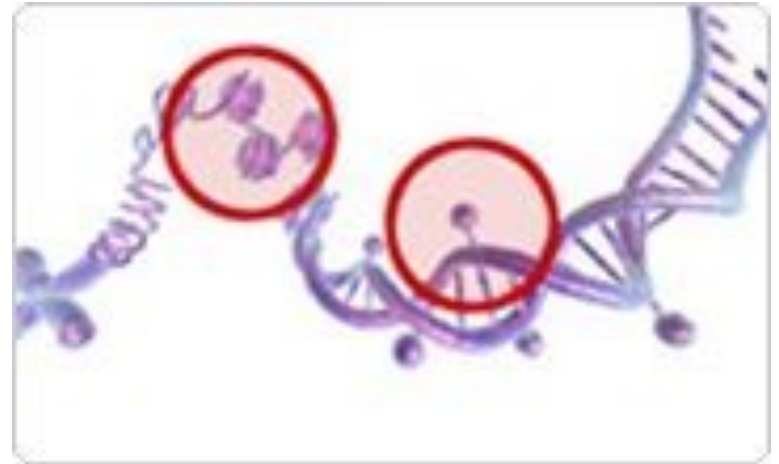
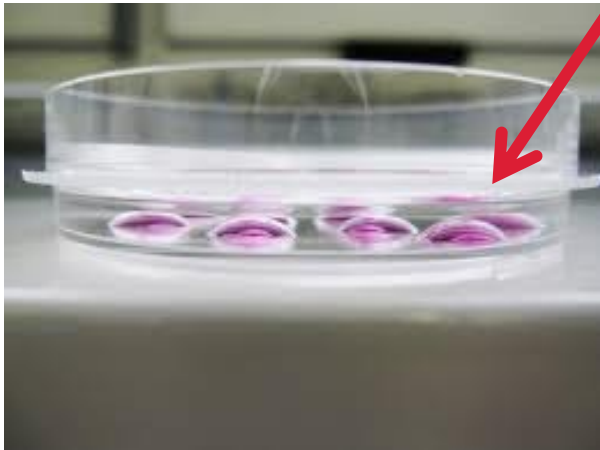
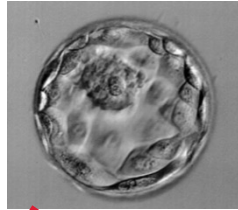
IVF, in vitro fertilization; ICSI, intracytoplasmic sperm injection; SC, spontaneous conception; ASD, atrial septal defect; VSD, ventricular septal defect.



# *Infertility is the contributor to outcomes associated with placentation*

- *Maternal morbidity is associated with diagnosis of infertility regardless of treatment*
- *Adverse outcomes are associated with both IVF and NIFT*
- *Congenital anomalies are associated with underlying infertility*
- *Time to pregnancy increases risk of congenital malformations*
  
- ***Models to study the effect of IVF need to include an infertile cohort***
  
- *Outcomes are related to placentation defects*
  - *Mother - diabetes, hypertension, preeclampsia, placenta previa and accreta, retained placenta and abruption as well as SMM*
  - *Child- prematurity, growth restriction, and birth defects*

Are the adverse outcomes associated with ART due to the in vitro fertilization process, the treatments or the inherent infertility we are trying to overcome?





# Prevalence of ART in patients with BWS

**TABLE 3**

**Prevalence of ART in patients with BWS.**

Reference no.	Type of study	No. of BWS cases	Prevalence of ART in BWS cohort (cases)	Prevalence of ART in reference population	Type of ART	Association between BWS and ART
62 <sup>a</sup>	Case series	65 <sup>b</sup>	4.6% (3 <sup>b</sup> )	0.8%	IVF/ICSI	Suggestive
63	Case series	149	4% (6 <sup>c</sup> )	1.2%	3 IVF/3 ICSI	Suggestive
64	Case series	149	4% (6 <sup>c</sup> )	1.3%	4 IVF/2 ICSI	Suggestive
65	Case-control	37	10.81% <sup>d</sup> (4)	0.67% <sup>d</sup>	3 IVF/1 ICSI	Suggestive
66 <sup>a</sup>	Case-series	341	5.6%(19)	NA	5 IVF/5 ICSI <sup>e</sup>	NA
67	Survey	209	2.9% (6 <sup>c</sup> )	0.8%	1 IVF/5 ICSI	Suggestive
71	Survey	71	5.6% (4)	0.92%	IVF/ICSI	Suggestive

<sup>a</sup> Data from the same BWS registry (NCI BWS registry and Washington University BWS registry).

<sup>b</sup> Only BWS cohorts beginning in 2001 were used to calculate prevalence.

<sup>c</sup> The frequency of children born after ART in BWS cohort was significantly higher than the expected ART cases based on the ART prevalence in the general population.

<sup>d</sup> Fisher's exact test, two-sided,  $P=0.006$ .

<sup>e</sup> Data on type of ART obtained from 12 patients (two patients had only ovarian stimulation with intrauterine insemination).

*Manipalviratn. Imprinting disorders and ART. Fertil Steril 2009.*

# Cohort studies of children

**TABLE 4**

Number of cases of BWS in a cohort study of children conceived naturally and after ART.

Reference no.	No. of cases of BWS in children born after ART	Number of children born after ART	No. of cases BWS in children conceived naturally	Number of children conceived naturally
68	0	6,052	0	442,349
69	0	16,280	NA	2,039,943
70	1	1,524	NA	NA

NA = Not available.

*Manipalviratn. Imprinting disorders and ART. Fertil Steril 2009.*

# ***Adverse pregnancy outcomes: methylation***

***Differences in DNA methylation and gene expression in term placenta from children conceived in vitro versus in vivo***

***Term placenta and cord blood and may not reflect the early changes that occur as a direct result of the IVF conditions in ART.***

***Term placenta may reflect changes in the intrauterine environment, which has been associated with an altered fetal epigenome leading to altered gene expression.***

# Placental Weight, Fetal Weight and Fetal Weight to Placenta Weight Ratio

Figure 1: Placental and Birth Weight Parameters

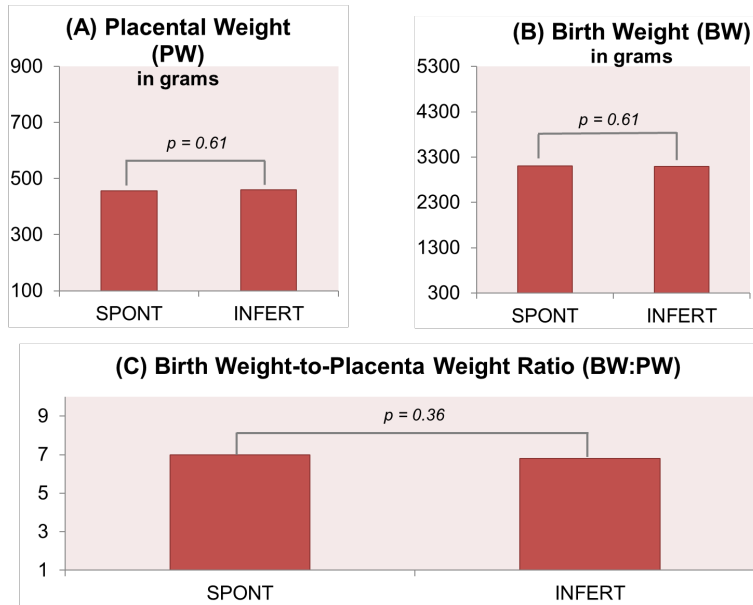
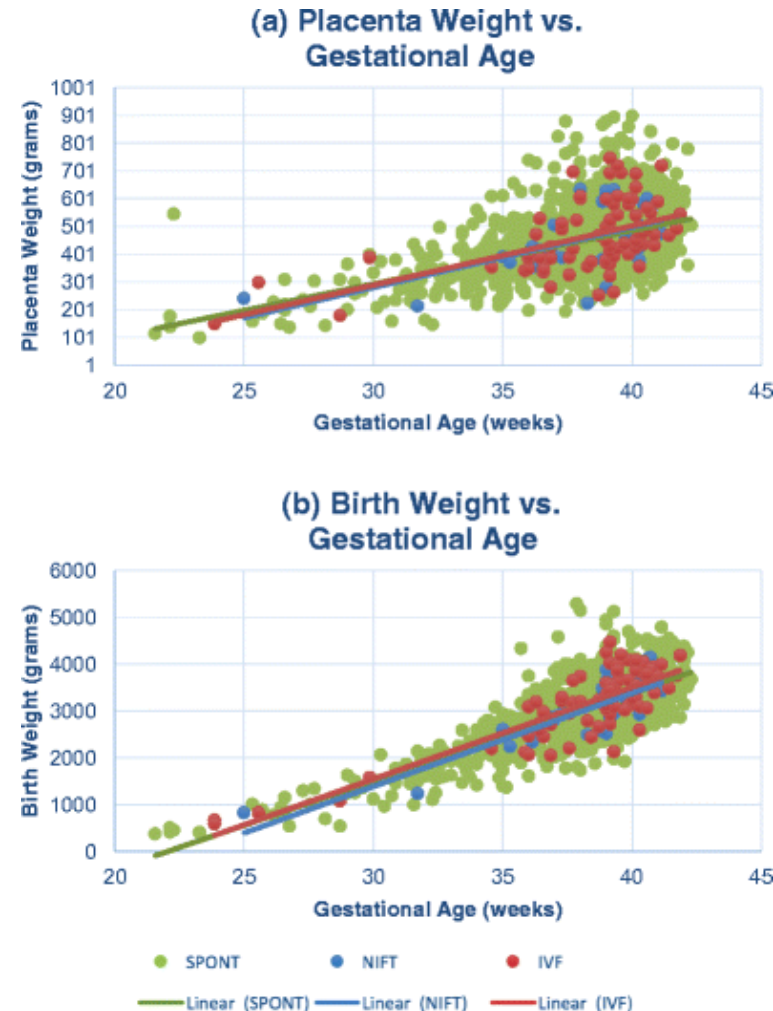


Figure 2: Placental Characteristics

	SPONT N=1333	INFERT (NIFT+IVF) N=110	p-value
Preeclampsia findings, n (%)	111 (8.3%)	9 (8.2%)	0.96
Chorioamnionitis, n (%)	392 (29.4%)	35 (31.8%)	0.59
<b>Accreta, n (%)</b>	<b>16 (1.2%)</b>	<b>4 (3.6%)</b>	<b>0.036</b>
Placental Shape, n (%)			0.23
Discoid	737 (55.3%)	58 (52.7%)	
Ellipsoid	202 (15.2%)	15 (13.6%)	
Ovoid	200 (15%)	14 (12.7%)	
Circular/Round	63 (4.7%)	5 (4.5%)	
Other	50 (3.8%)	9 (8.2%)	

# Placental Weight, Fetal Size and Fetal Size to Placenta Weight Ratio

- *Linear regression demonstrates that regardless of gestational age, the placenta weight, fetal weight and fetal size to placenta weight do not vary by mode of conception.*



# Placentation

*Abnormal placentation is associated with adverse pregnancy outcomes - preeclampsia, PIH, gestational diabetes, previa, abruption, placental retention*

*Pregnancies conceived with infertility and treatments are at risk of:*

*abnormal placentation*

*abnormal placental morphology and cord insertion*

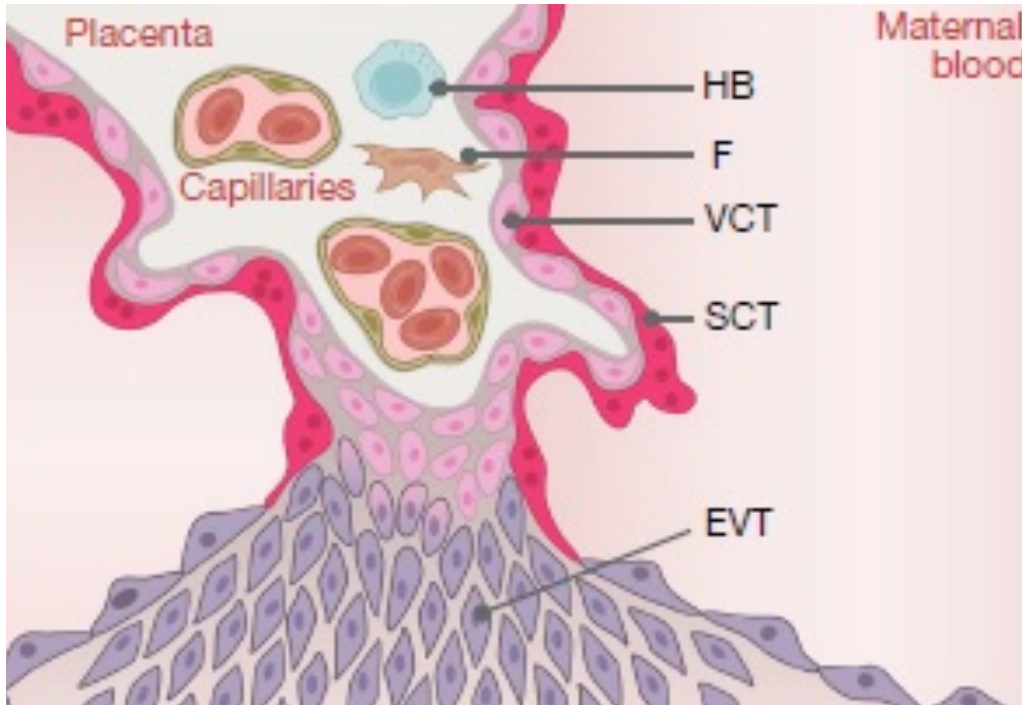
*abnormal protein profiles*

*increased metabolism and clearance of steroids by the placenta*

*Small for gestational age babies*



# Placentation



The placenta is made up of important cell types

**Villous cytotrophoblasts (VCT):** undifferentiated precursor cells

**Extravillous trophoblasts (EVT):** Invade decidua and maternal blood vessels

**Syncytiotrophoblasts (SCT):** Facilitate nutrient exchange and produce hormones

**Endothelial cells:** Line fetal blood vessels

**Immune cells:** stromal fibroblasts (F), dendritic cells, macrophages or Hofbauer cells (HB)

# Model of Placentation

- **1<sup>st</sup> trimester placenta tissue**

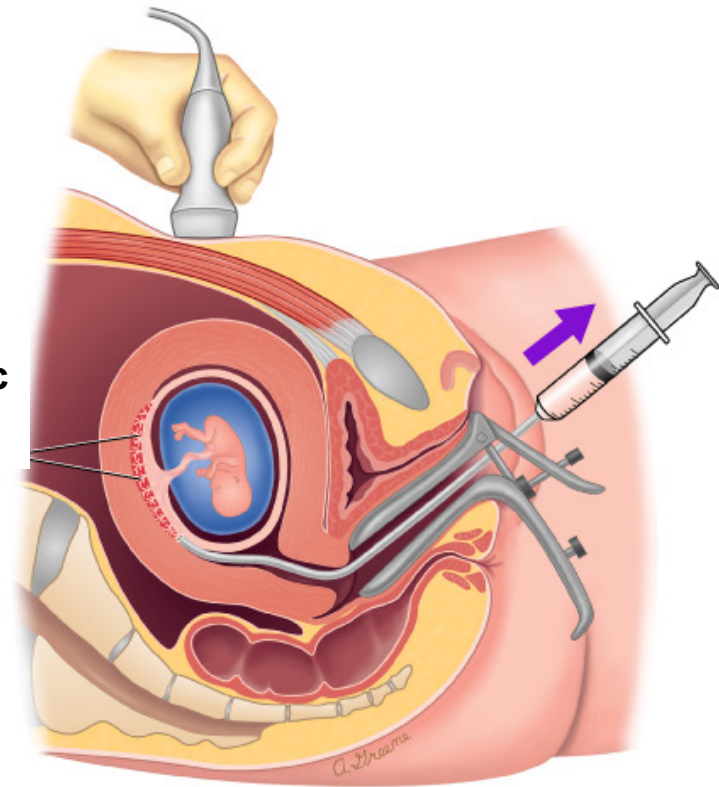
Chorionic villus sampling

Prenatal diagnostic test at 11-13 weeks

Ongoing pregnancies that deliver at term

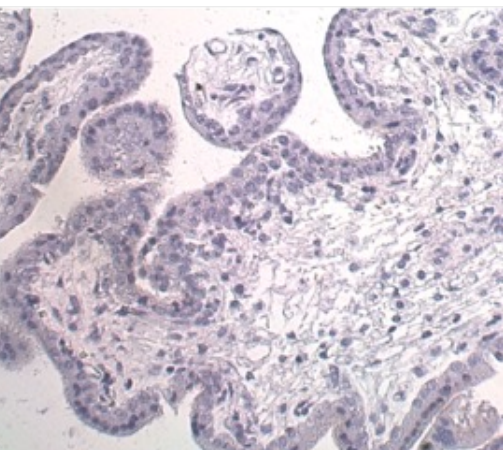


Chorionic villi



***Are the outcomes associated with ART due to the in vitro fertilization process, the treatments or the inherent infertility we are trying to overcome?***

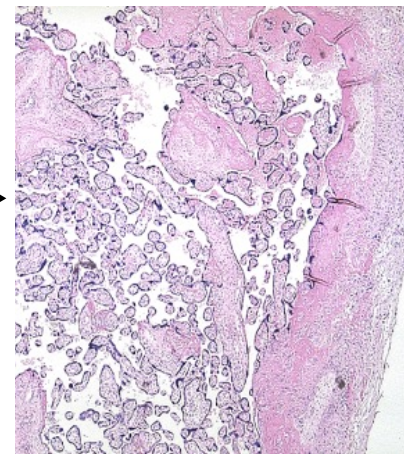
***Cells from early placentation***



***Uterine environment***



***Cells from delivery***



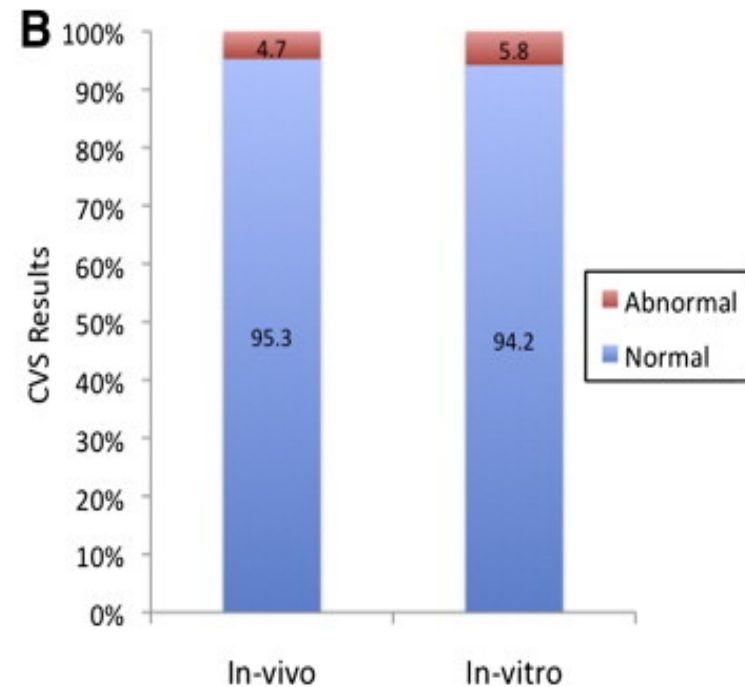
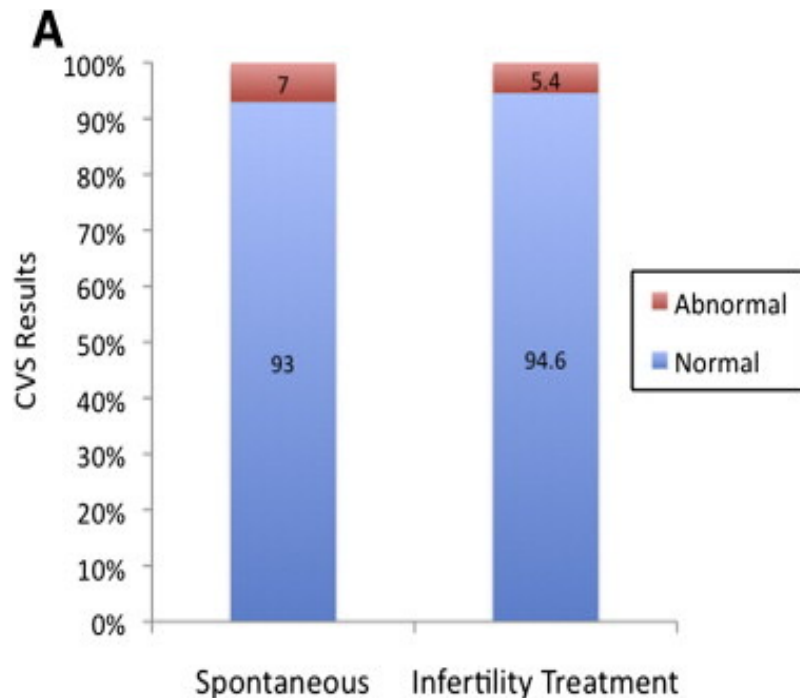
***Outcomes***



***Earliest time point in ongoing pregnancy***

# Cytogenetic Abnormalities assessed by CVS in Spontaneous vs. Infertile Patients

- 1,606 women conceived spontaneously
- 559 women conceived through infertility treatment
  - 233 conceived in vivo
  - 326 conceived in vitro

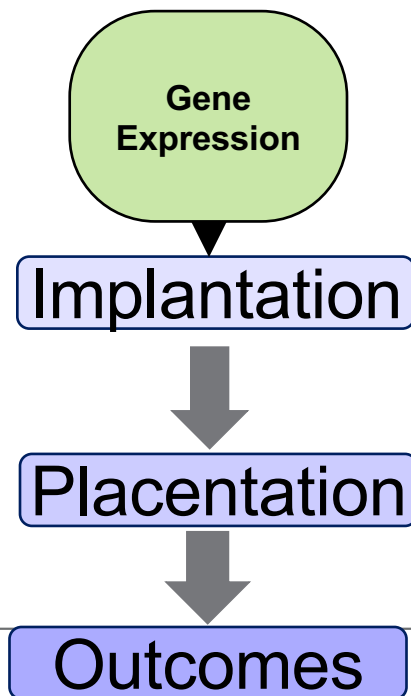


# ***Spontaneous/ Medical Assisted/ART (SMAART) Cohort***

- **a cohort of pregnancies conceived either spontaneously or in couples with infertility conceived either through non-IVF fertility treatment (NIFT) or IVF, that are enrolled in the late first trimester of pregnancy at the time of Chorionic Villus Sampling (CVS) and followed until delivery**
  - 208 spontaneous conceptions
  - 201 pregnancies conceived with a history of Infertility
    - 90 conceived with NIFT
    - 111 conceived with IVF



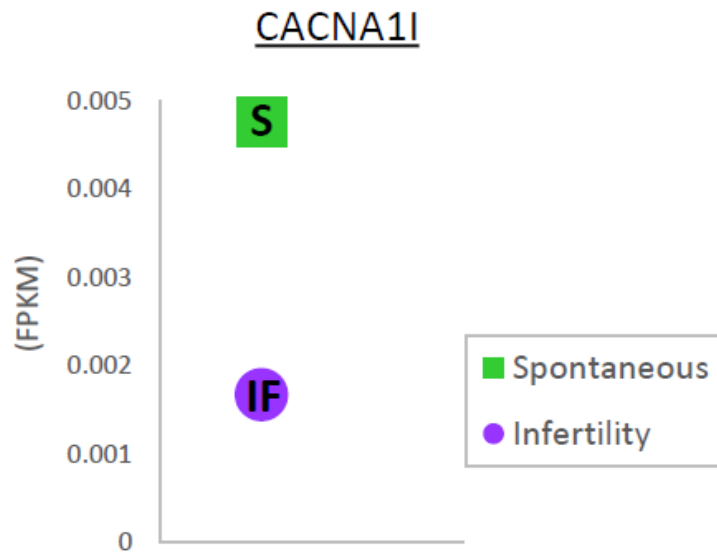
# ***SMAART Cohort***





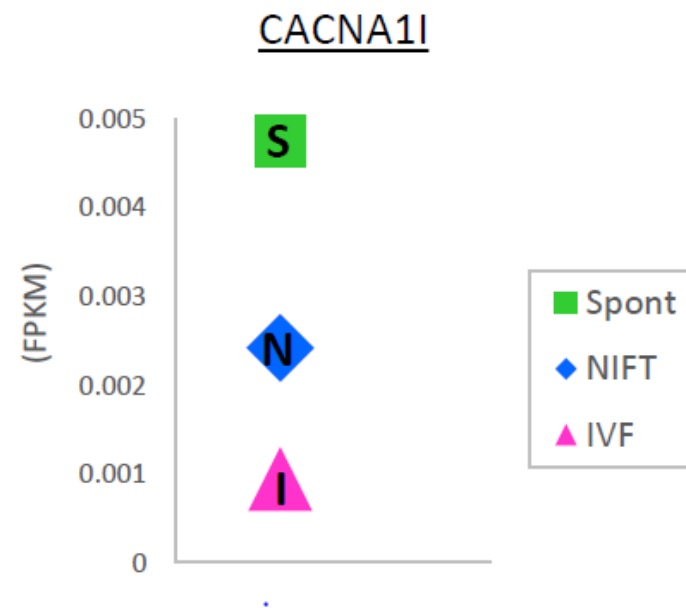
# SMAART Transcriptome cohort

A. Spontaneous vs Infertility



Calcium voltage-gated channel subunit alpha1

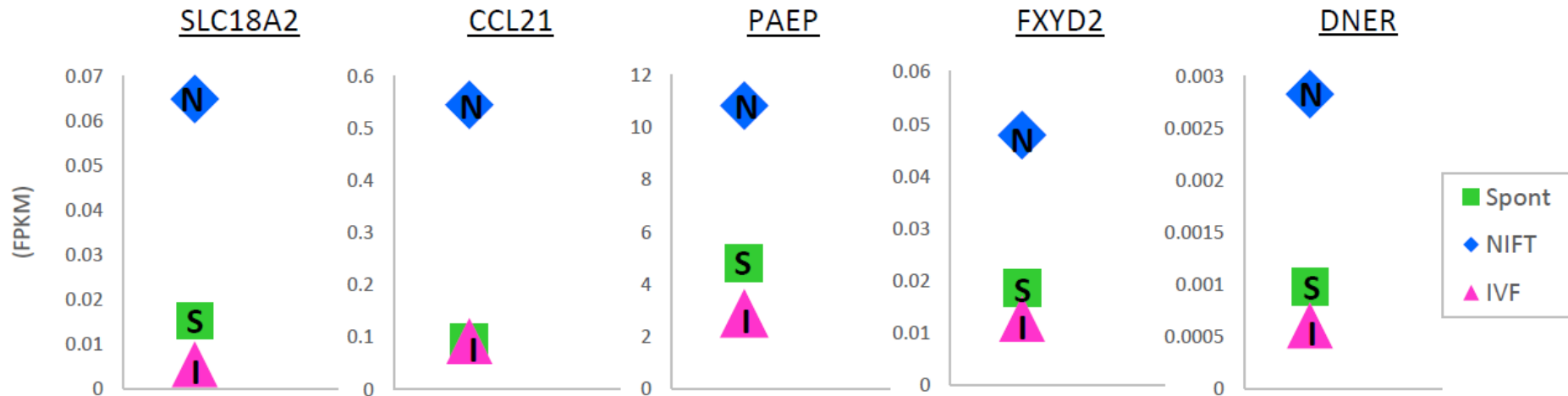
B. Spontaneous vs IVF



Calcium voltage-gated channel subunit alpha1

# SMAART Transcriptome cohort

## C. NIFT vs IVF



Solute carrier family 18 member A2

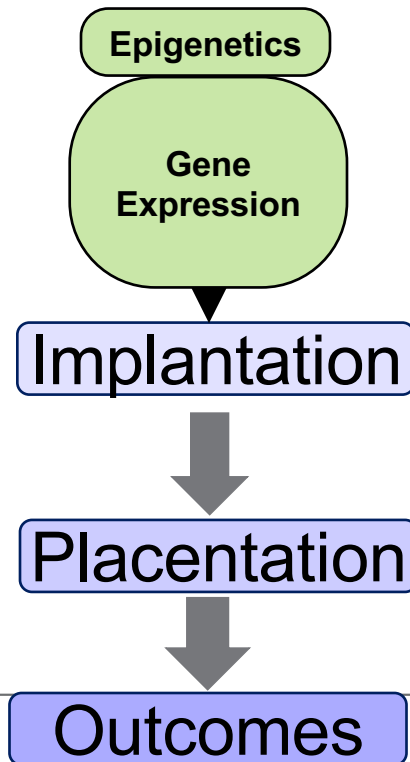
C-C motif chemokine ligand 21

Progesterone associated endometrial protein

FXYD domain containing ion transport regulator 2

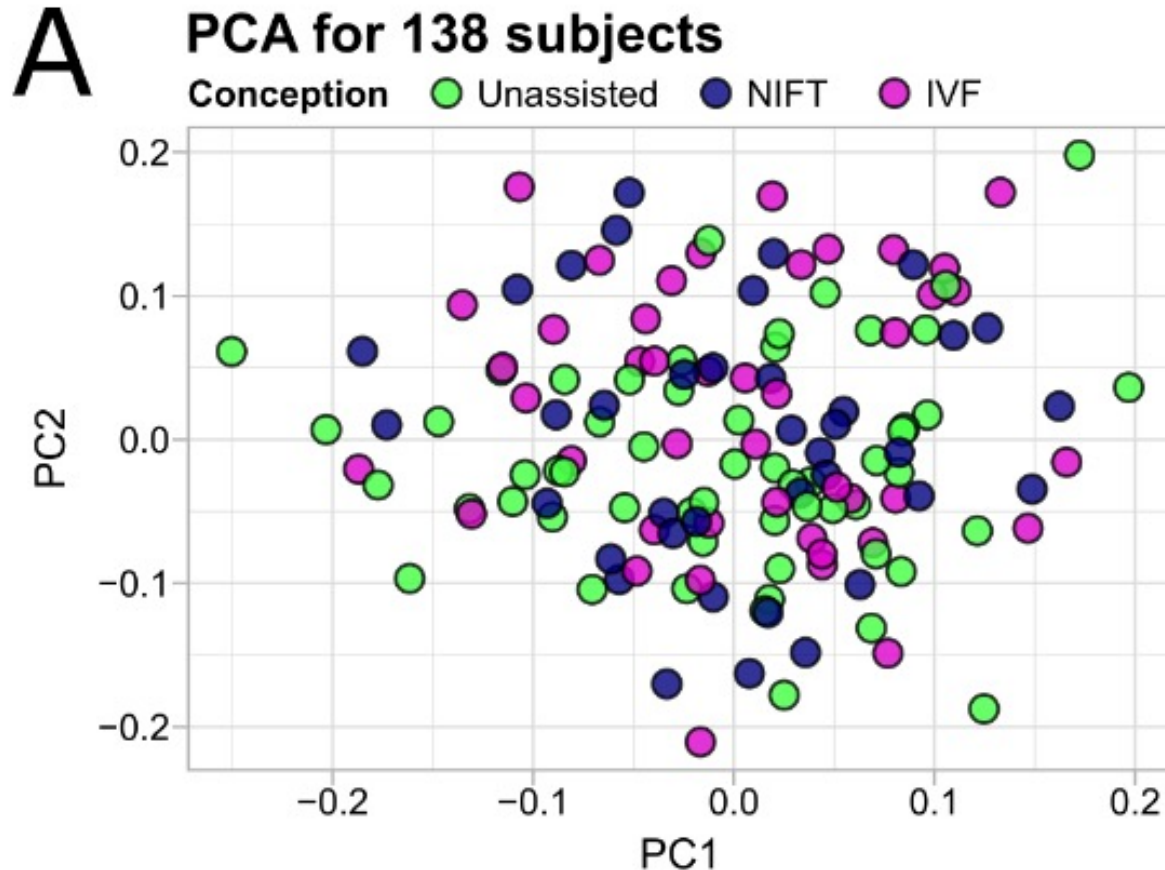
Delta/notch like EGF repeat containing

# ***SMAART Cohort***



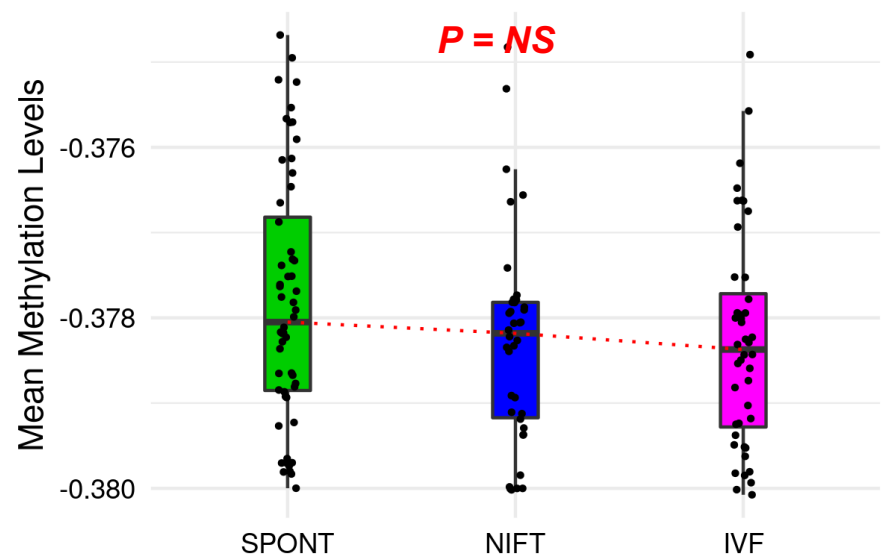
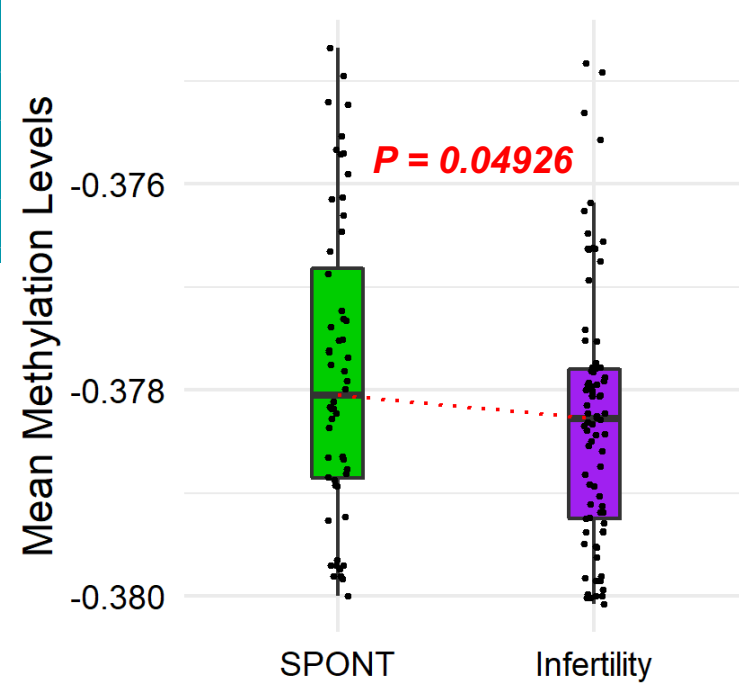
# Global methylation alterations due to infertility and treatments

- Principle Component analysis does not demonstrate clustering



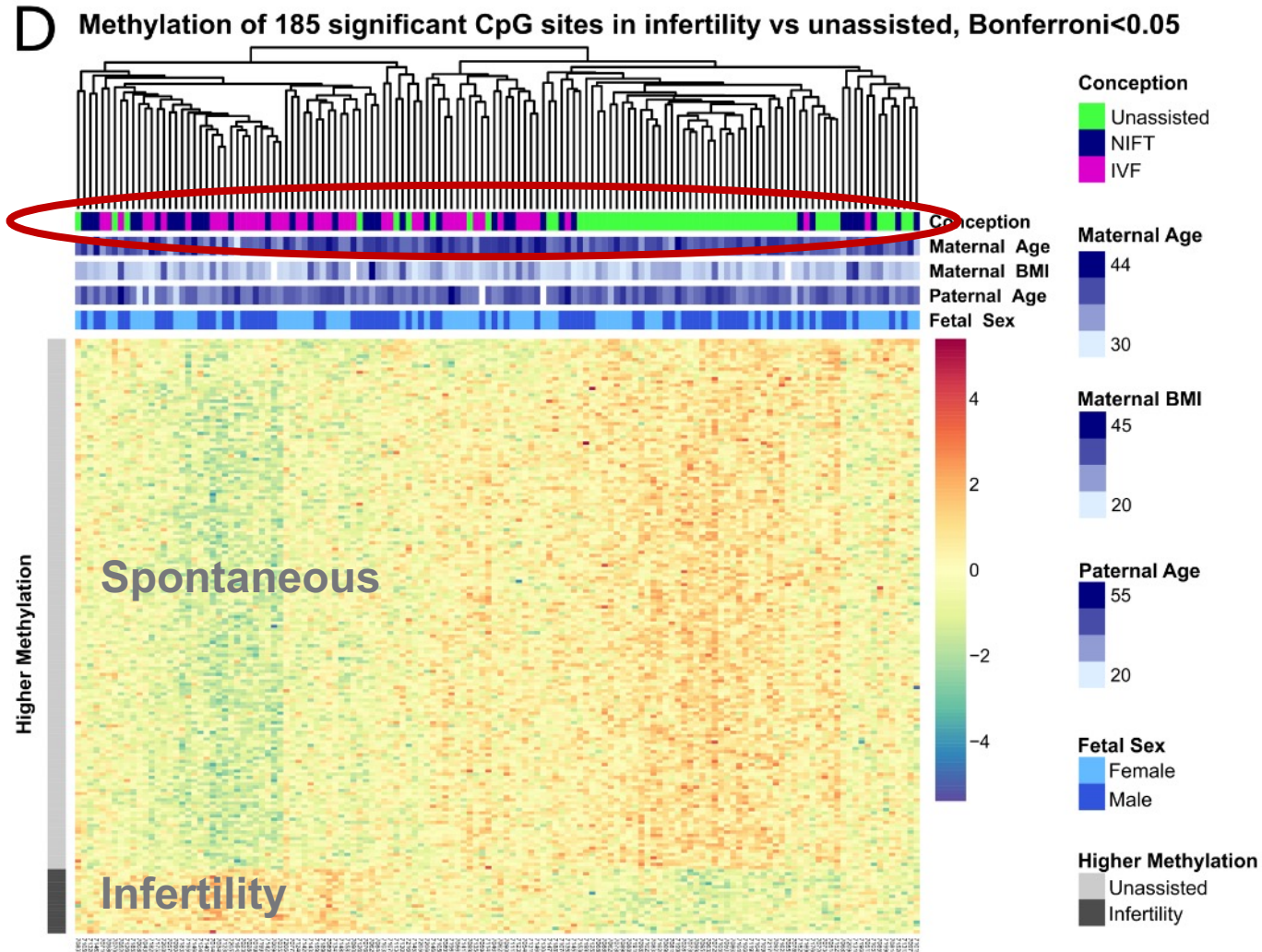
# Global methylation alterations due to infertility and treatments

- Median  $\beta$  values were significantly lower in the infertility cohort compared to the spontaneous cohort.
- Median  $\beta$  values were lower in the NIFT and IVF cohort compared to spontaneous cohort, but overall there was no significant difference among the groups.
- Infertility may be associated with global hypomethylation and not the specific treatment.

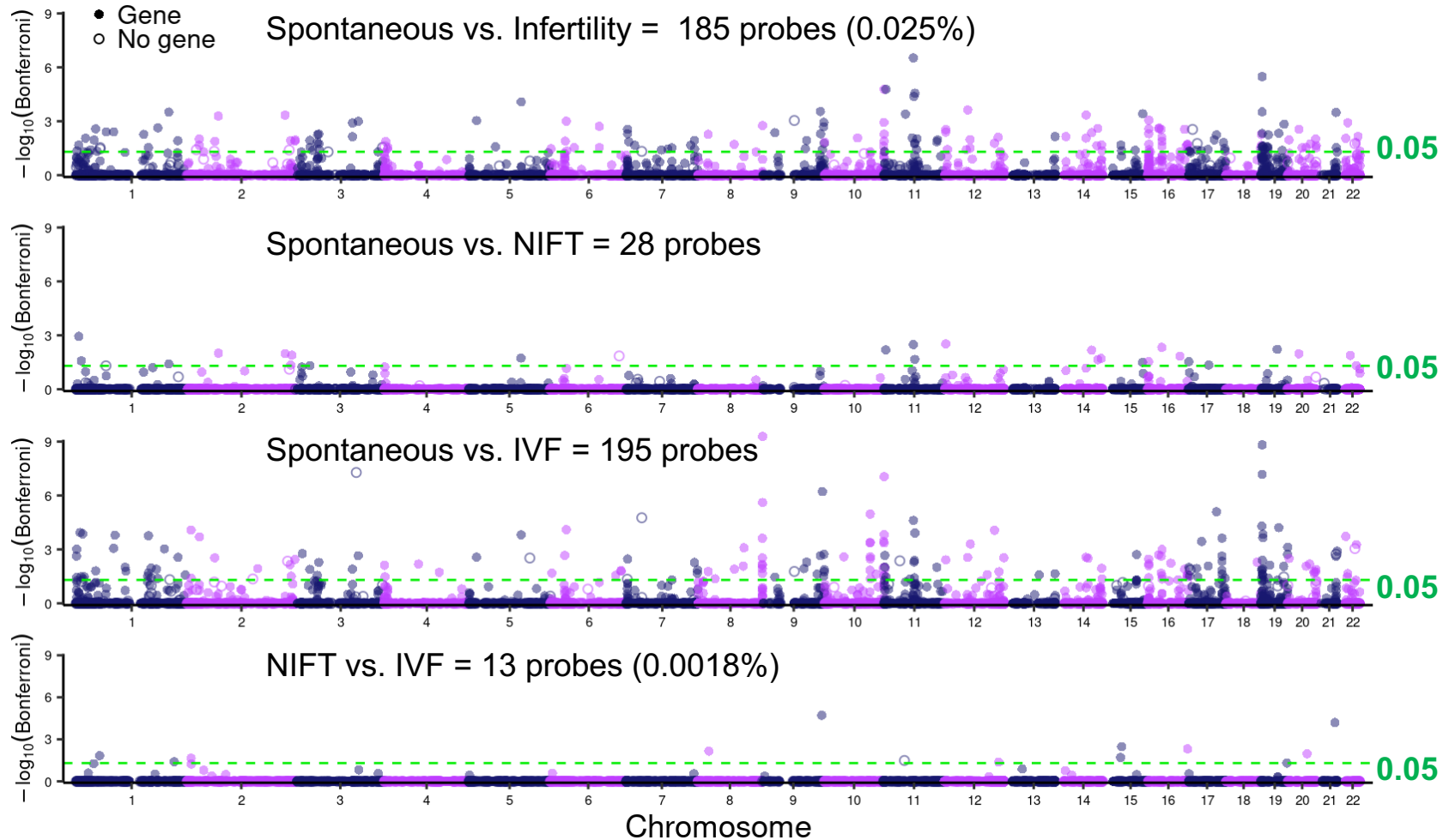


# Global Differential Methylation due to infertility and treatments

- Clustering is identified between the infertility and spontaneous cohort.
- Within the infertility cohort, there is no clustering of NIFT or IVF cohorts, suggesting diversity among the infertility group, independent of treatment utilized.

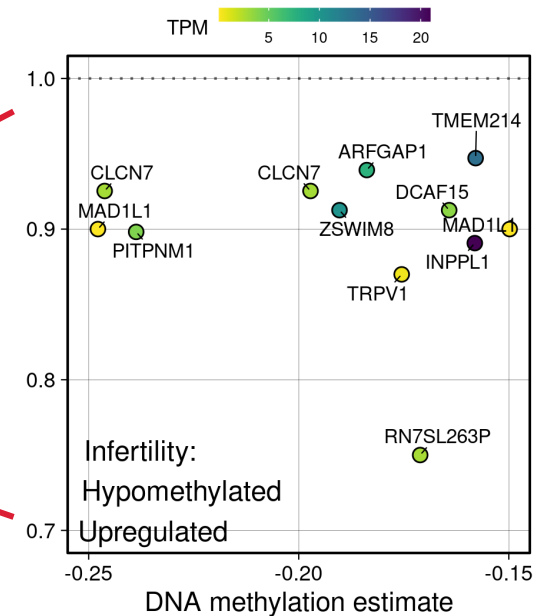
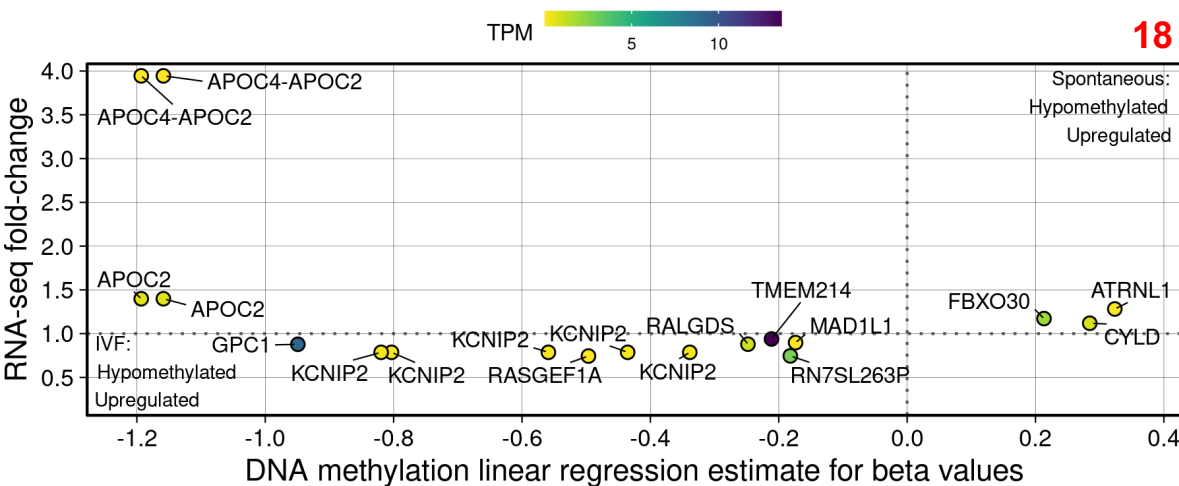
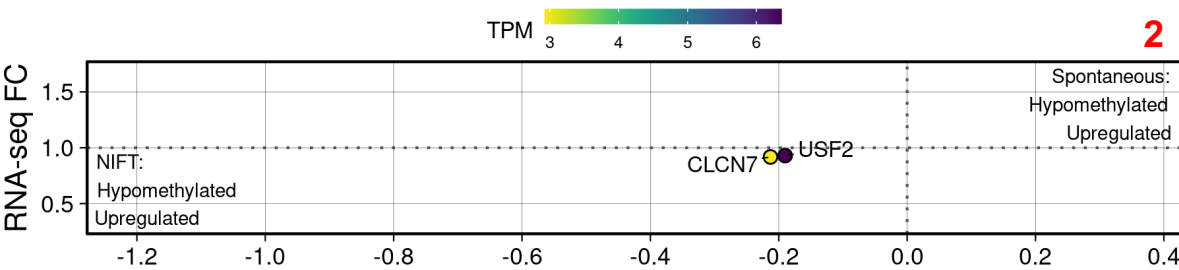
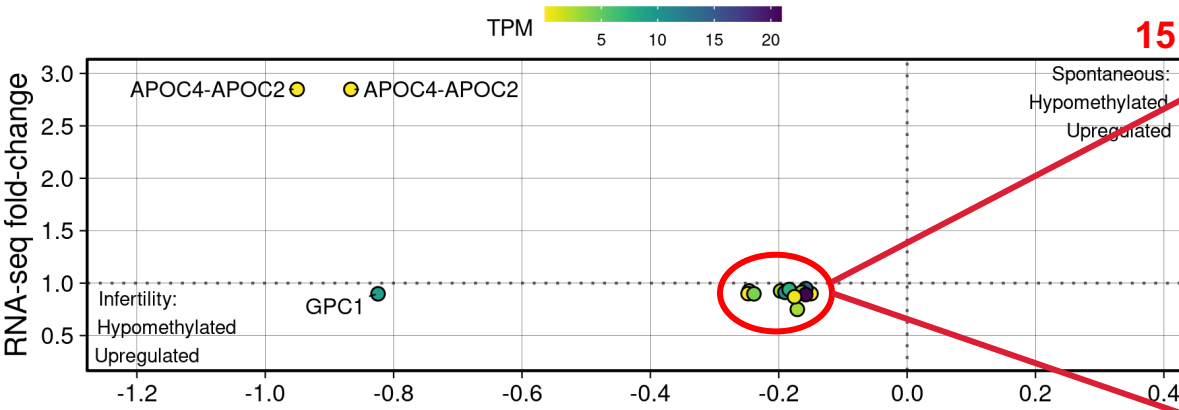


# Chromosomal Distribution of Differentially Methylated Probes due to infertility and treatments





# Differential methylation and gene expression in infertility and treatments



**Differentially methylated probes and associated DEGs:**

- Spontaneous vs. Infertility = 15
- NIFT vs. Spontaneous = 2
- IVF vs. Spontaneous = 18
- NIFT vs. IVF = 0

# Methylation Changes Across the Lifespan

## A Systematic Review



	Trophoctoderm	Pregnancy			Newborn		Childhood		Adult
		1 <sup>st</sup> Trimester Placenta	Fetal Tissue	Term Placenta	Cord Blood	Newborn Dried Blood Spot	Buccal Smears	Peripheral Blood	Peripheral Blood
<b>Infertile vs Fertile</b>	Denomme (2021)								
<b>IVF (+/- ICSI) vs Unassisted</b>		Xu (2017) Gonzalez (2022)	Liu (2021)	Katari (2009)	Katari (2009) Melamed (2015) Tobi (2020) Haberg (2022)	Novakovic (2019) ** Yeung (2021)	Ducreux (2021)	Yeung (2021)	Novakovic (2019)** Penova-Veselinovic (2021)
<b>ICSI Only vs Unassisted</b>					El Hajj (2017) Gentilini (2018)	Estill (2016) Yeung (2021)			
<b>NIFT vs Unassisted</b>		Xu (2017) Gonzalez (2022)				Estill (2016) Yeung (2021)		Yeung (2021)	
<b>IVF vs NIFT</b>		Xu (2017) Gonzalez (2022)		Choufani (2019) *		Estill (2016)			
<b>Infertility (NIFT + IVF +/- unassisted with h/o infertility) vs Fertile</b>		Gonzalez (2022)		Choufani (2019)	Caramaschi (2021)	Estill (2016) Yeung (2021)		Yeung (2021)	

\*NIFT cohort contained those with history of infertility conceiving unassisted  
 \*\* IVF cohort Also contained GIFT

# Interpreting Data in a Larger Context: Systematic Review

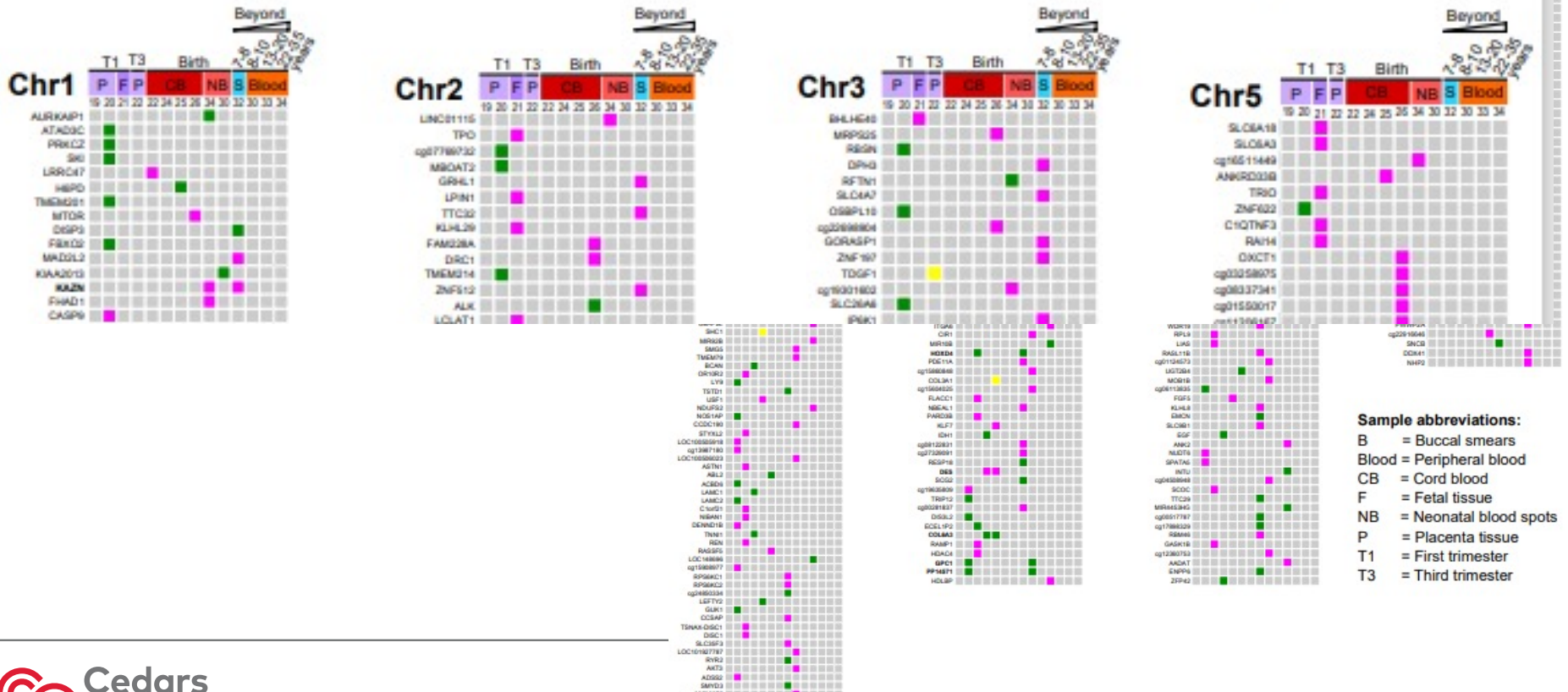
## DNA methylation higher in...

■ Unassisted 
 ■ In vitro fertilization 
 ■ Mixed (CpG sites inconsistent within gene) 
 ■ Not significant or no data



## DNA methylation higher in...

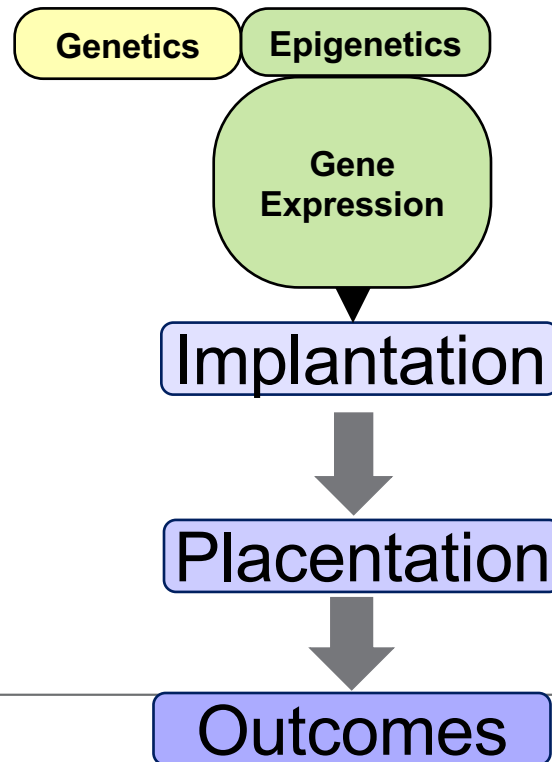
■ Unassisted 
 ■ In vitro fertilization 
 ■ Mixed (CpG sites inconsistent within gene) 
 ■ Not significant or no data



**Sample abbreviations:**

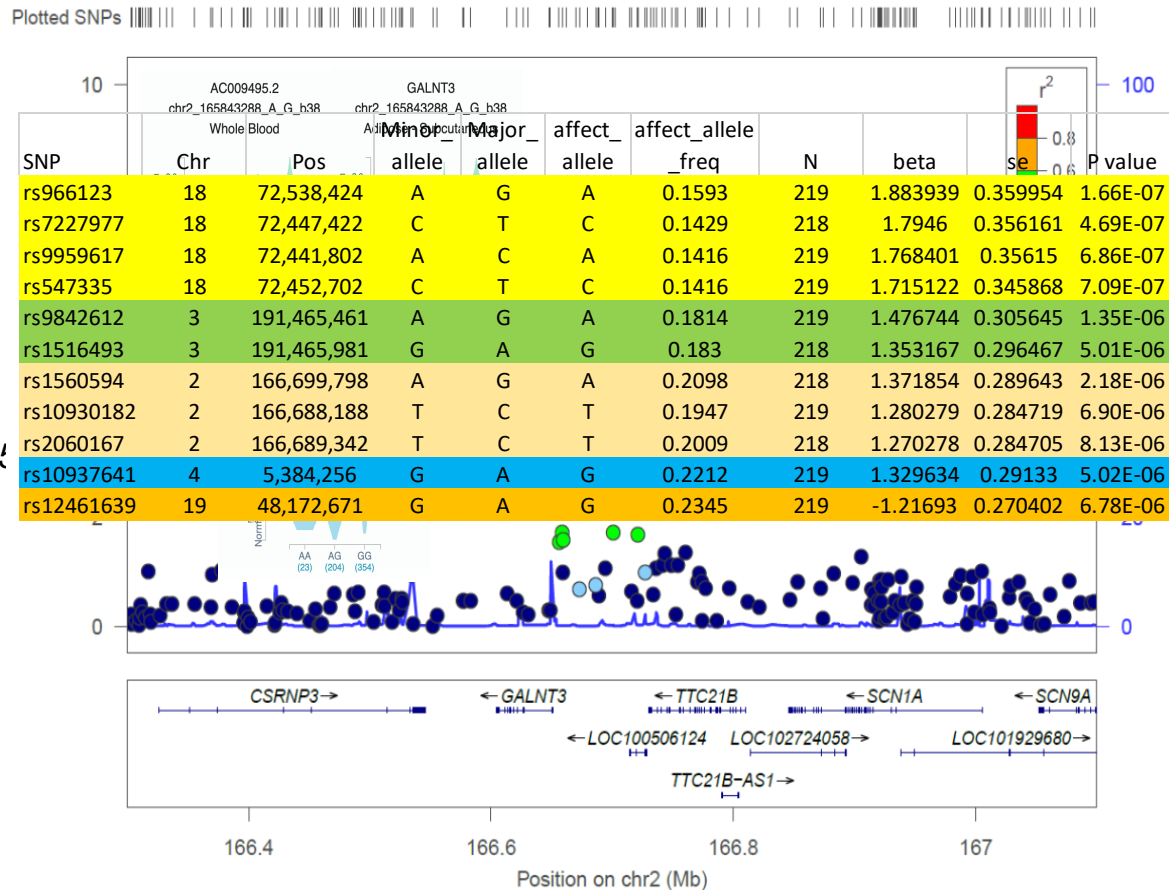
- B = Buccal smears
- Blood = Peripheral blood
- CB = Cord blood
- F = Fetal tissue
- NB = Neonatal blood spots
- P = Placenta tissue
- T1 = First trimester
- T3 = Third trimester

# ***SMAART Cohort***

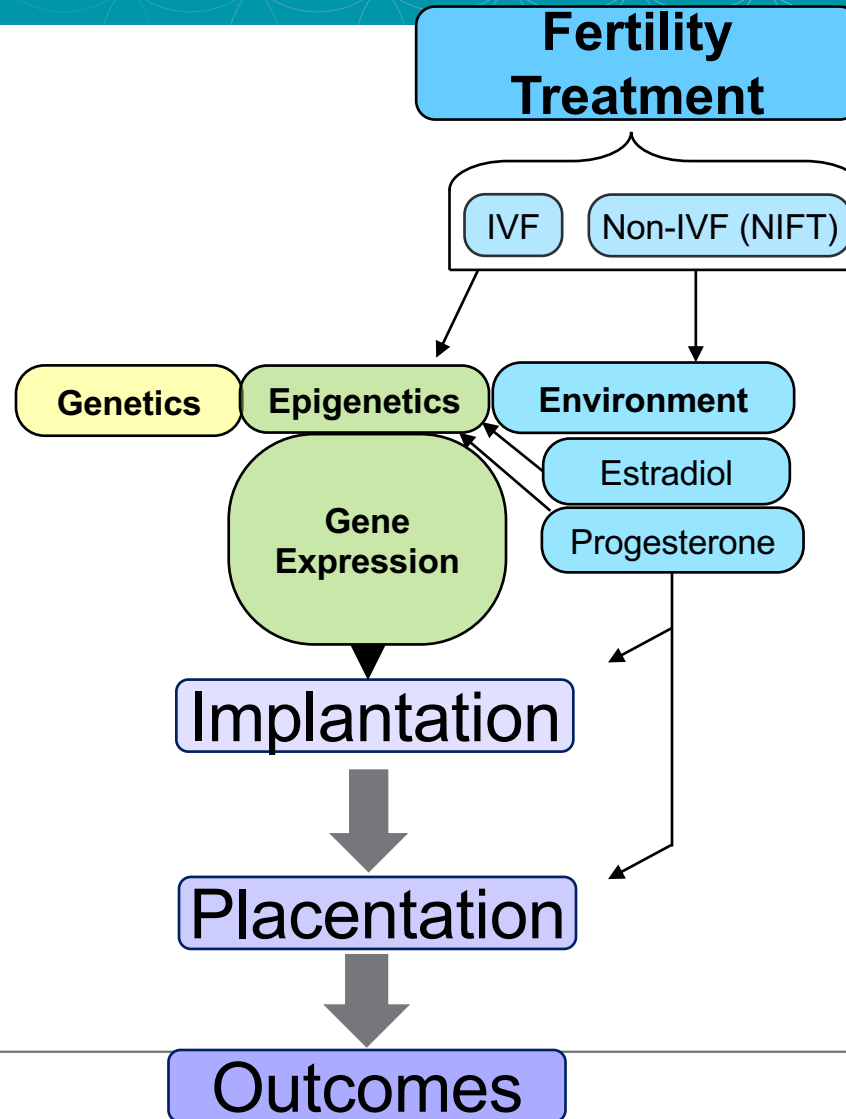


# Single nucleotide variants (SNVs) that associate with infertility – Family associated GWAS

• A total of 8 SNVs, most the SNVs were associated with partition response of  $5 \times 10^{-8}$  expression. For the index risk SNV rs1560594,  $p = 2.18 \times 10^{-6}$ , eQTL plots demonstrate associations for the noncoding transcript AC009495.2, GALNT3 and TTC21B in whole blood and adipose.



# SMART Cohort



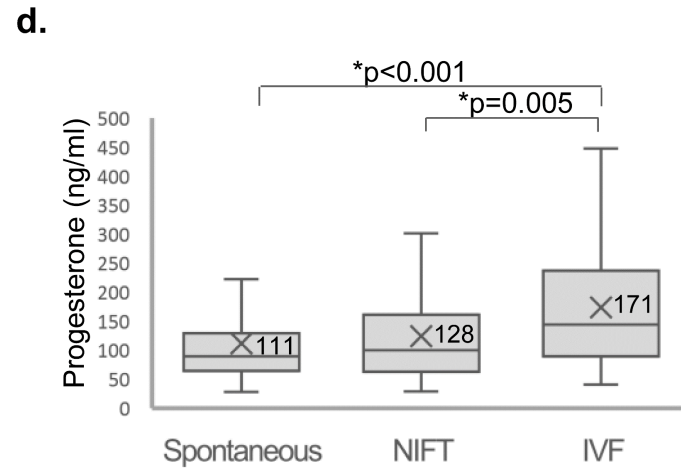
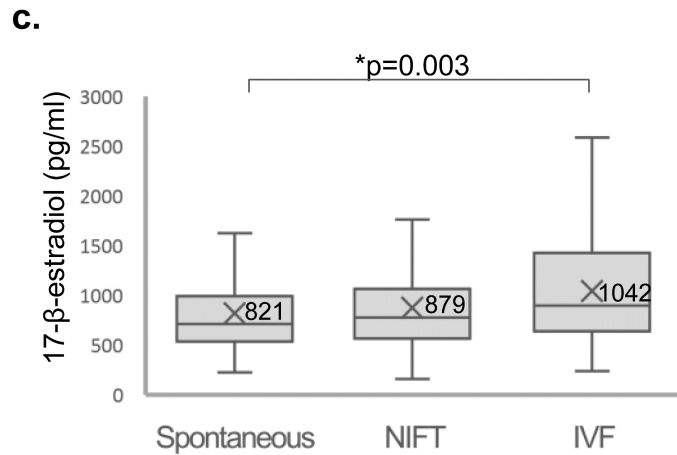
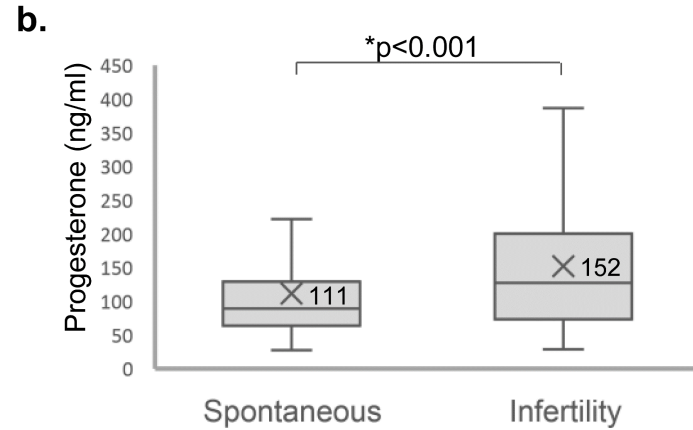
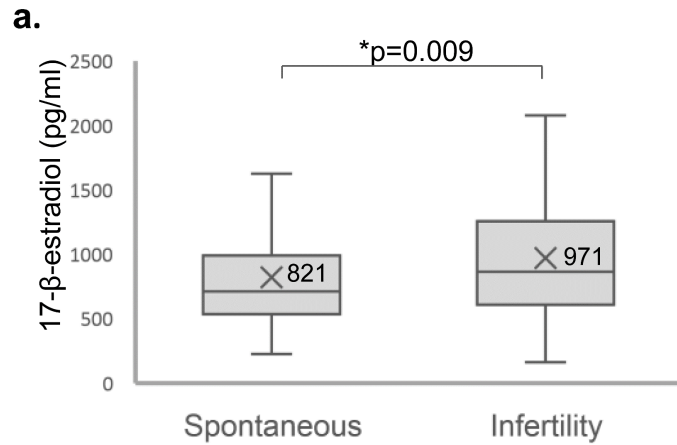


# Supraphysiologic Hormones

- *Supraphysiologic hormone levels have been implicated in increased rates of low birth weight and small for gestational age babies.*
- *Since pregnancies conceived through fertility treatments are exposed to elevated estradiol and progesterone levels, either endogenously through treatments or exogenously to supplement the pregnancy, we wanted to determine whether previous treatments impact the hormonal milieu of an ongoing pregnancy.*



# The Supraphysiologic Hormonal Milieu

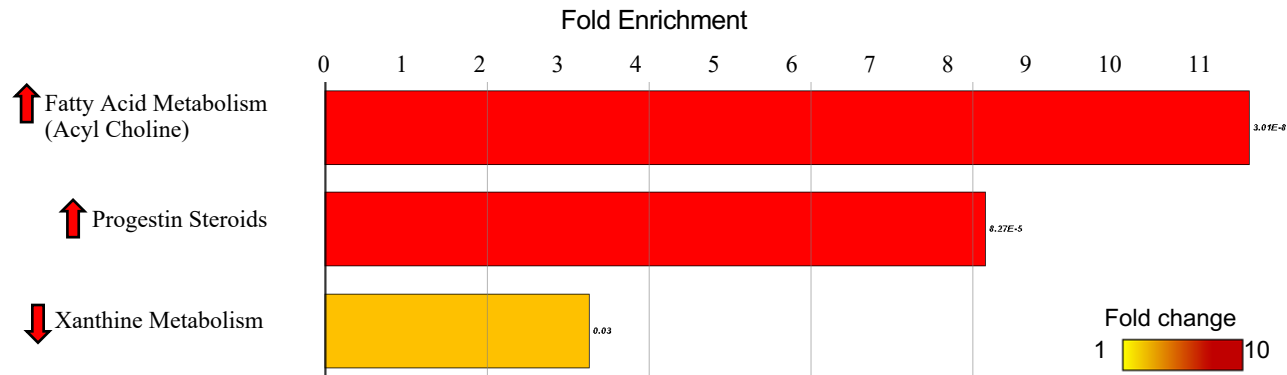


# Differences in metabolomic profiles in late first trimester

## Pathway enrichment analysis

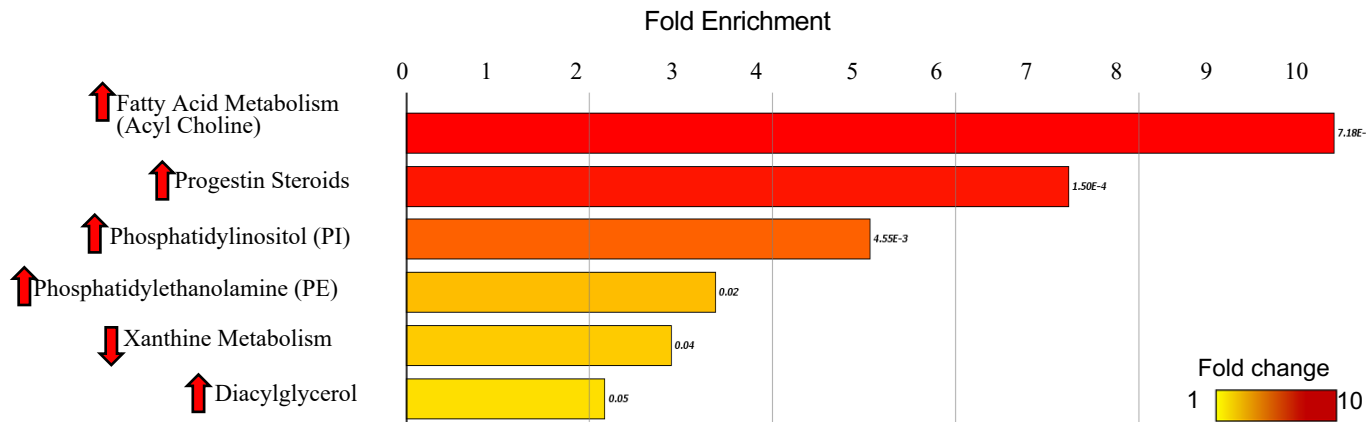
a.

### Infertility vs. Spontaneous

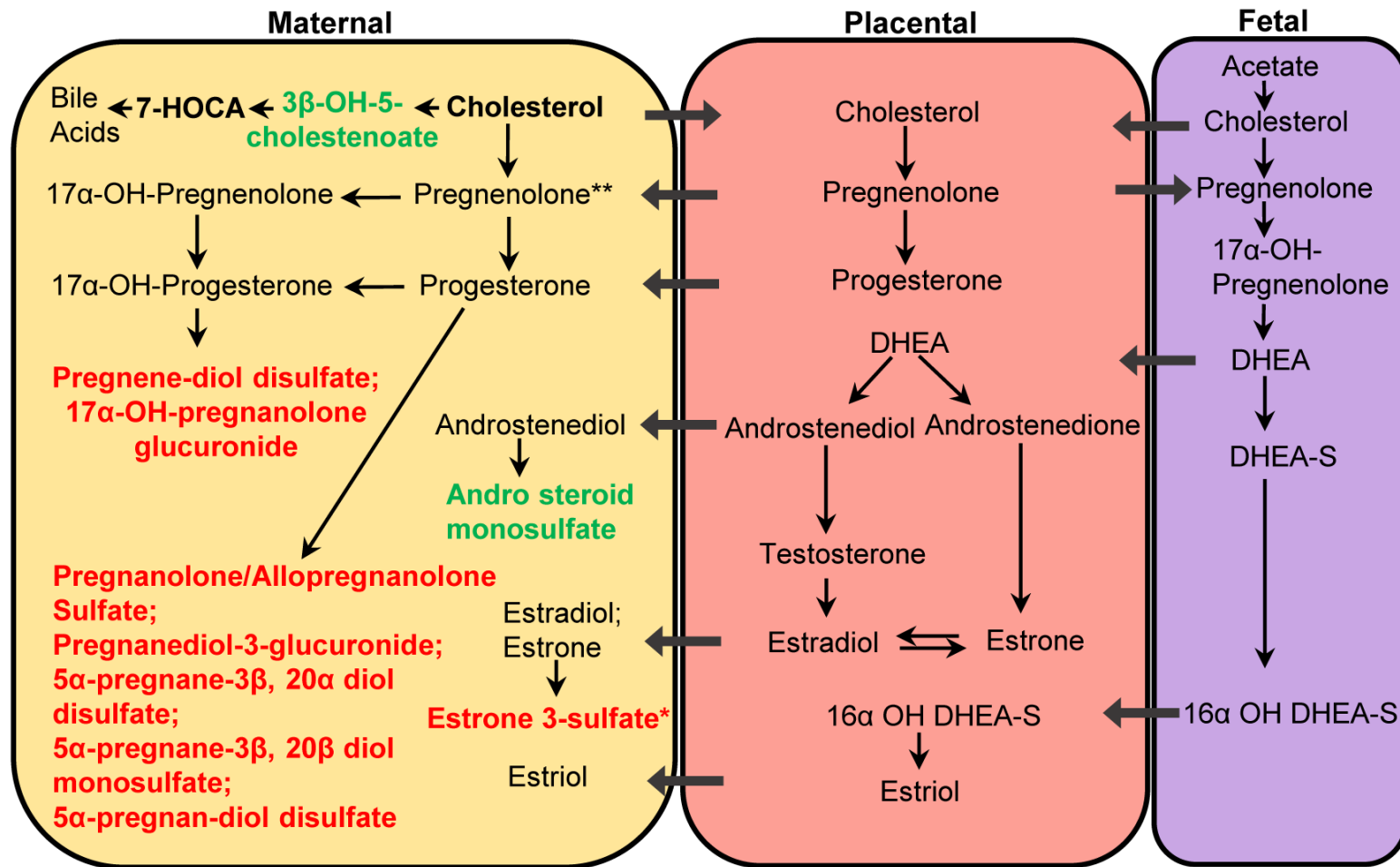


b.

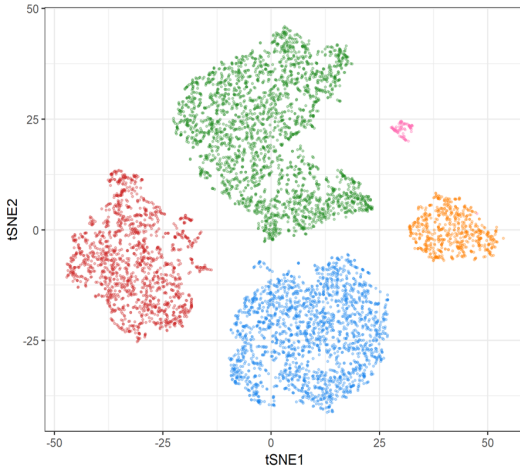
### IVF vs. Spontaneous



# Model of steroid hormones and metabolites within the maternal-placental-fetal unit



# First Trimester Chorionic Villi- Single Cell Sequencing

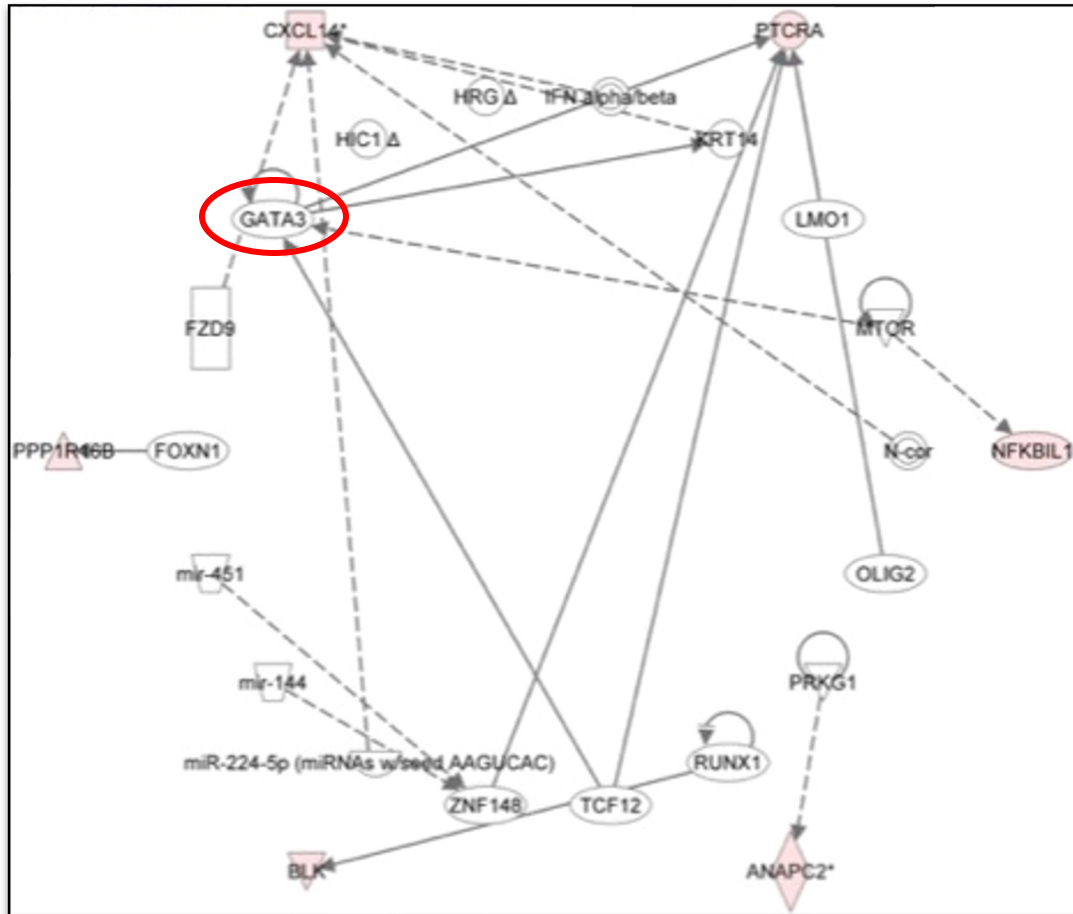


- P1 Trophoblast Cells
- P2 Stromal Cells
- P3 Macrophages
- P4 Dendritic Cells
- P5 Endothelial Cells

P1 (Trophoblast)	Molecule Type	p-value	Targets
BMP4	Growth factor	3.9E-21	26
<b>beta-estradiol</b>	Chemical – endogenous	9.34E-15	60
<b>PGR</b>	Ligand-dependent nuclear receptor	2.35E-13	22
ERBB2	Kinase	3.81E-12	33
<b>ESR1</b>	Ligand-dependent nuclear receptor	5.54E-12	44
TGFB1	Growth factor	9.98E-10	48
HRAS	Enzyme	1.98E-09	26
PTEN	Phosphatase	5.12E-09	22
TP53	Transcription regulator	9.39E-09	43
TNF	Cytokine	2.39E-08	45
P2 (Stromal)	Molecule Type	p-value	Targets
TGFB1	Growth factor	3.26E-29	98
<b>beta-estradiol</b>	Chemical – endogenous	5.06E-27	99
FGF2	Growth factor	8.5E-24	42
CTNNB1	Transcription regulator	1.52E-23	58
WNT3A	Cytokine	1.53E-21	34
AHR	Ligand-dependent nuclear receptor	5.98E-20	37
TGFB2	Growth factor	9.85E-19	22
TGFB3	Growth factor	2.83E-18	22
TWIST1	Transcription regulator	2.97E-18	25
HRAS	Enzyme	8.9E-18	45

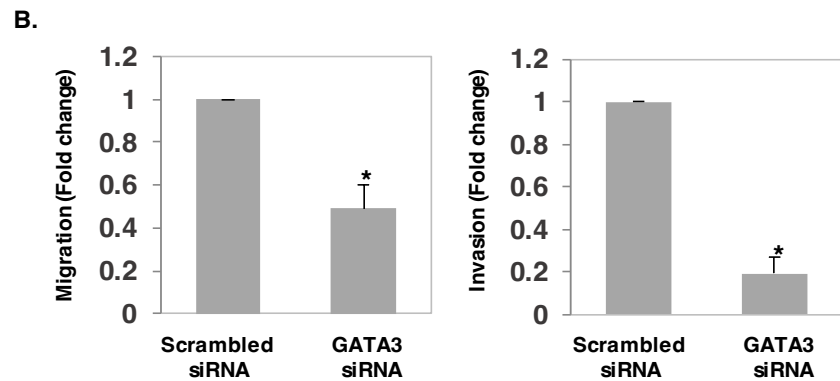
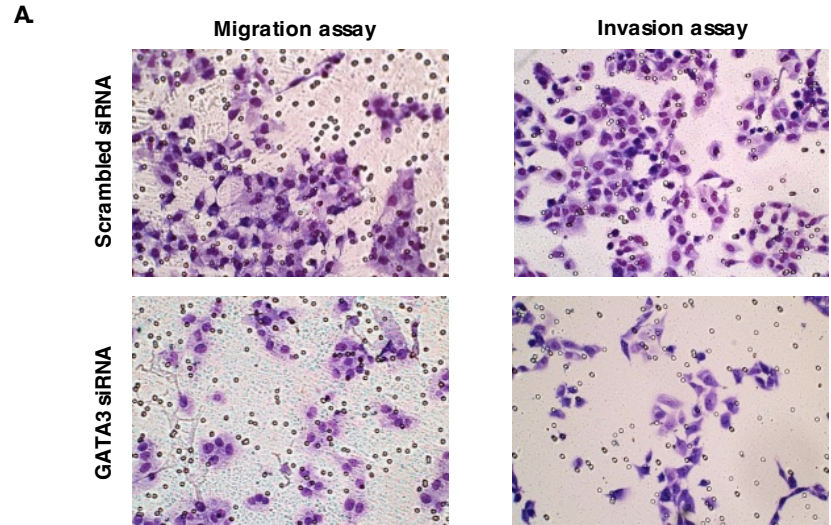
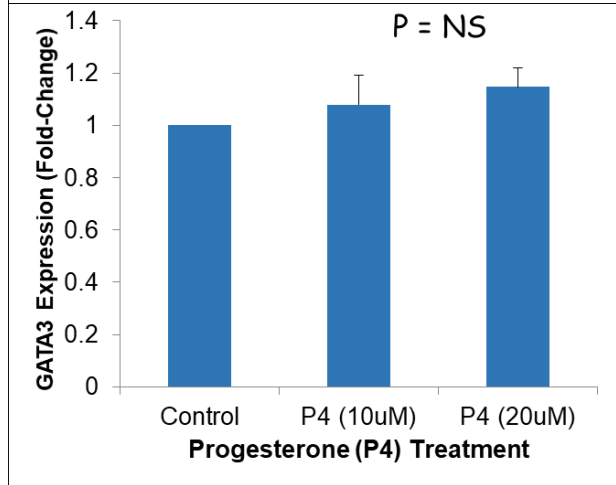
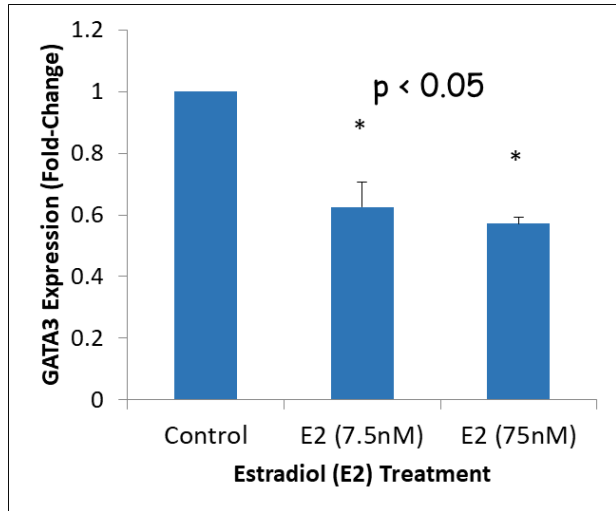
P3 (macrophages)	Molecule Type	p-value	Targets
CSF2	Cytokine	5.32E-20	35
TNF	Cytokine	6.32E-20	66
leukotriene D4	Chemical - endogenous	3.48E-19	16
IL13	Cytokine	1.59E-15	28
IFNG	Cytokine	6.54E-15	50
<b>beta-estradiol</b>	Chemical – endogenous	2.19E-14	60
IL1B	Cytokine	5.7E-14	39
CSF1	Cytokine	3.34E-12	18
IL4	Cytokine	3.63E-12	36
IL2	Cytokine	8.48E-11	27
P4 (Dendritic-like)	Molecule Type	p-value	Targets
IFNG	Cytokine	4.82E-27	48
TGFB1	Growth factor	4.45E-20	46
TNF	Cytokine	1.91E-18	44
IL13	Cytokine	1.61E-17	23
IL27	Cytokine	6.75E-17	16
IL4	Cytokine	4.2E-16	30
CIITA	Transcription regulator	5.3E-15	10
IL1B	Cytokine	5.48E-15	29
CSF3	Cytokine	3.81E-14	15
<b>beta-estradiol</b>	Chemical - endogenous	5.37E-14	40
P5 (Endothelial)	Molecule Type	p-value	Targets
KLF2	Transcription regulator	4.38E-10	10
TNF	Cytokine	8.04E-09	25
TGFB1	Growth factor	8.61E-09	25
CAV1	Transmembrane receptor	7.25E-08	8
ENG	Transmembrane receptor	4.63E-07	5
<b>ESR1</b>	Ligand-dependent nuclear receptor	2.27E-06	18
SRC	Kinase	5.46E-06	6
TCF7L2	Transcription regulator	5.68E-06	9
ERBB2	Kinase	6.54E-06	13
miR-199a-5p	Mature microRNA	7.77E-06	5

# Upstream Analysis of Differentially Methylated Genes



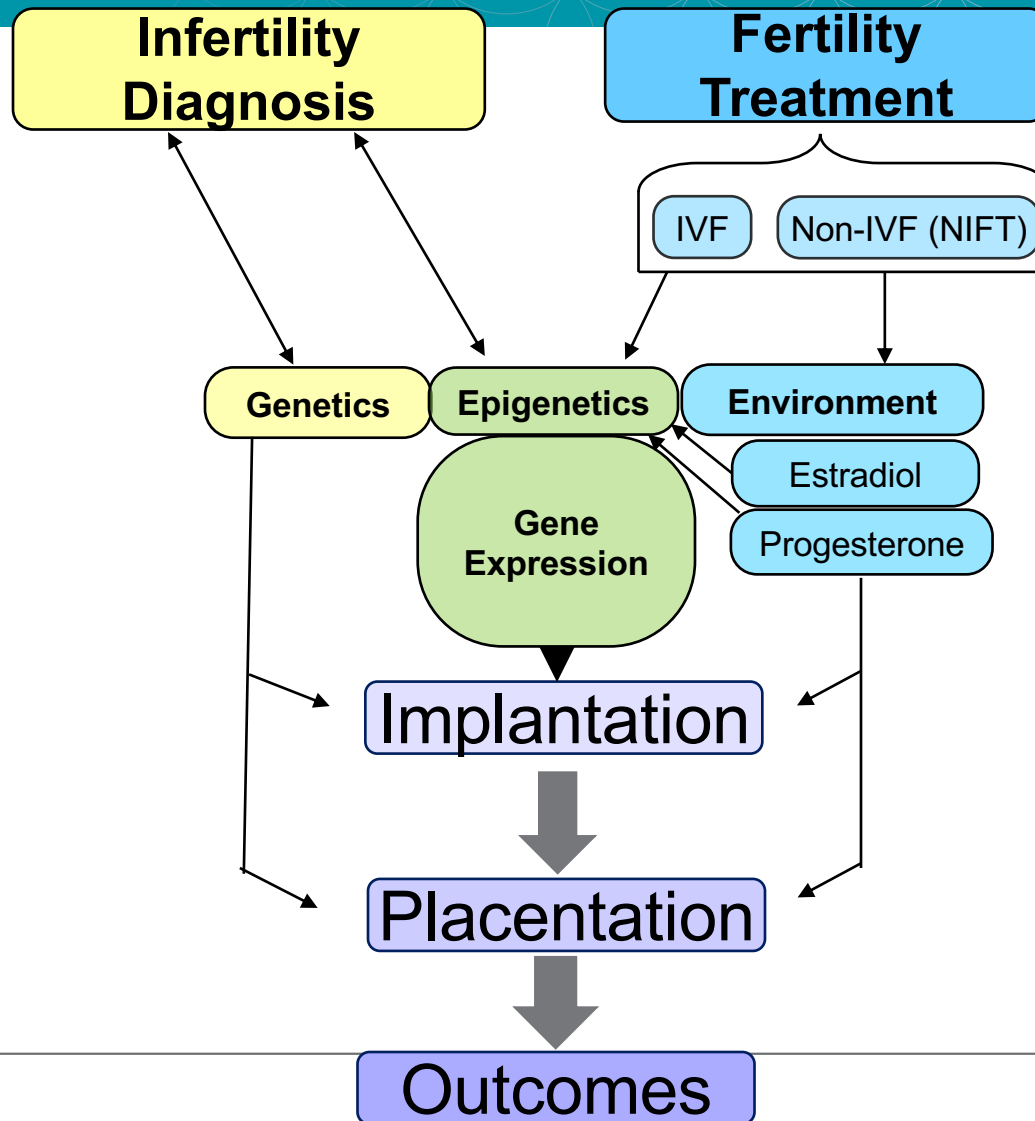
- Directs trophectoderm differentiation in the blastocyst
- Regulates trophoblast function important for:
  - Placental vascularization
  - Syncytiotrophoblast formation
  - Reduced *GATA3* expression in mice shows decreased embryo hatching and implantation

# Estradiol downregulates GATA3 and downregulation of GATA3 inhibits migration and invasion



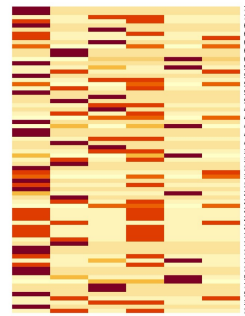


# SMART Cohort

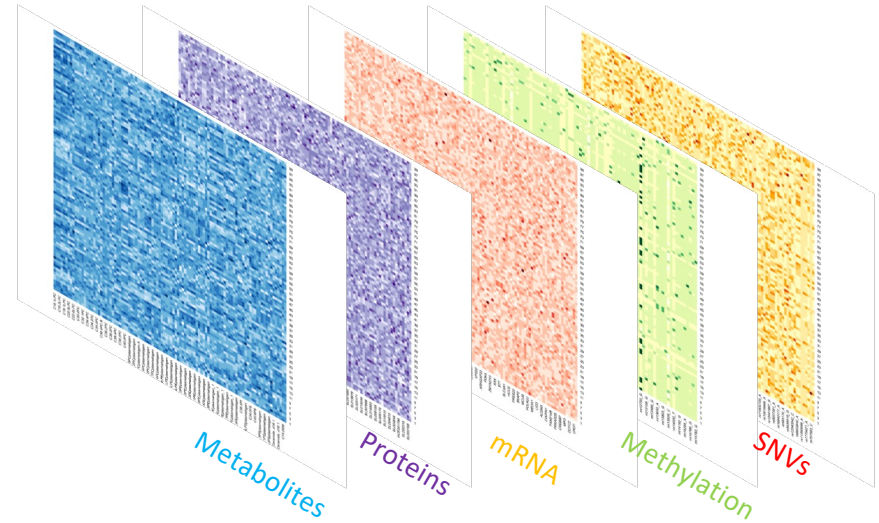


# Impact of infertility on placentation through a multi-omics analysis

Regularized  
Canonical  
Correlation Analysis  
- Provides  
correlation across a  
large data  
landscape using  
small sample sizes



Phenotypes



Data	Features
Phenotypes	7 traits
Genomics - OmniExpressExome Chip	688,534 SNVs
Methylomics - methylation EPIC Array (Illumina)	865,855 sites
Transcriptomics -Total RNA sequencing	61,801 genes
Metabolomics of mother's serum (Metabolon)	704 metabolites

# Genetic/epigenetic impact of infertility on placentation through a multi-omics analysis

Correlation Component	Spont	Infertility	Sex	Mat Age	Race	CVS age
1	0.048				0.99	0.05
2				-0.11		
3	0.99		-0.11			
4			0.11	0.99		
5	0.11		0.99			
6	-0.034	0.002	-0.99			0.06

- Component 3 contains the association of infertility with the rest of the data landscape
- Effect of sex, maternal age, race, and CVS age are separated from the effect of infertility

- **296 Features Identified in Component 3**

- Genomics: 40 Features (SNVs)
- Methylomics: 40 Features (methylated regions)
- Metabolomics: 8 Features (metabolites)
- Transcriptomics: 209 Features (transcripts)

- **Central Theme – Mitochondrial Regulation**

- **Mitochondrial Regulatory Genes**

- ARAF
- MYOF
- PRKCZ
- DNAJC1
- MTFR1

- **Mitochondrial small RNAs**

- Nuclear encoded
- Regulators of mitochondrial transcription
  - MTATP6P9,23,31
  - MTCO2P7; MTCYBP42
  - MTND1P2,20,28,31
  - MTND2P15,20
  - MTND4P1,4,8

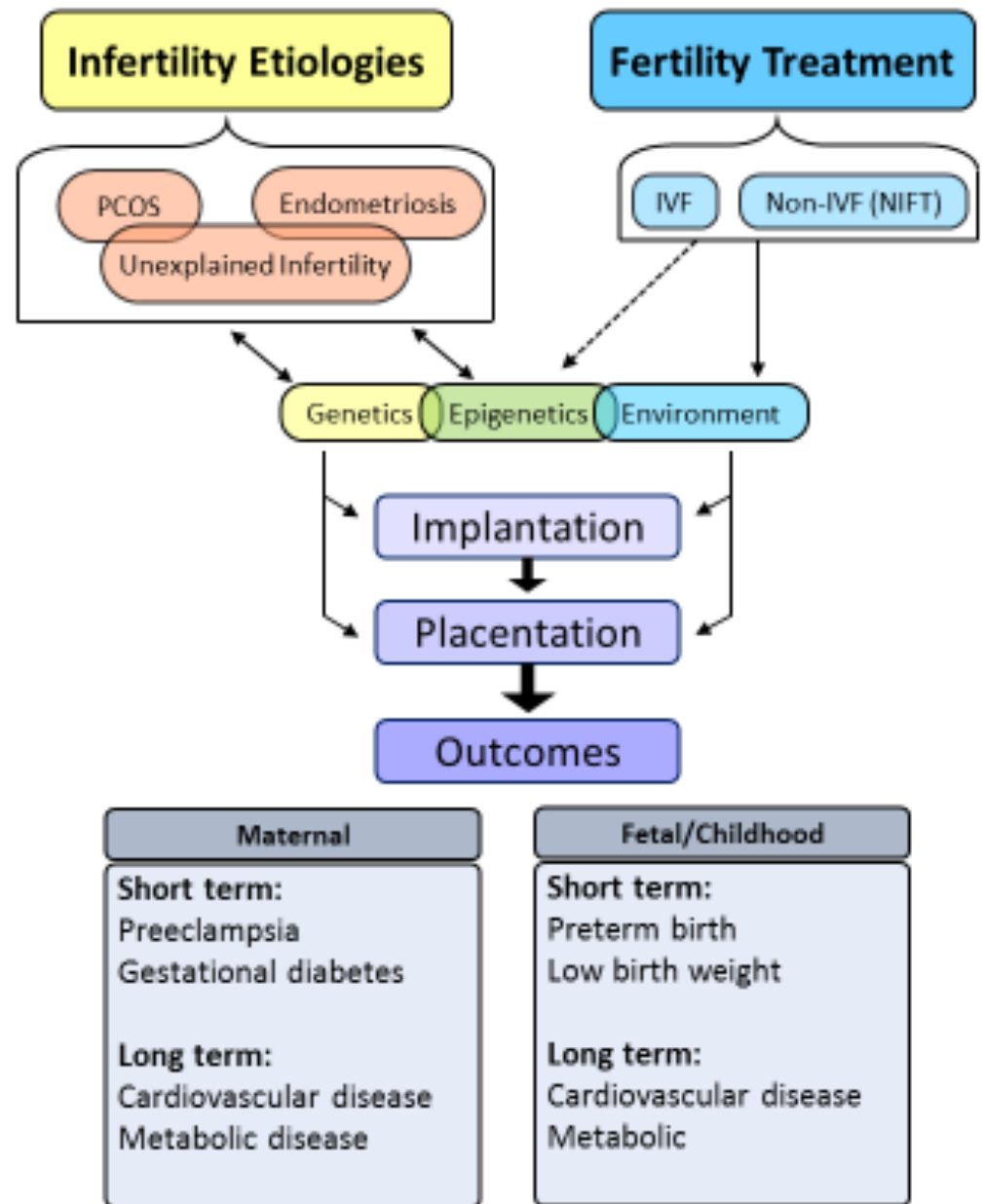
# Conclusions

- *Infertility and/or the treatments are associated with some increased risks of adverse outcomes to mother and child including:*
  - *Mother -diabetes, pregnancy induced hypertension, placenta previa and abruption as well as SMM*
  - *Child- prematurity, growth restriction, and birth defects*
- **RISKS ARE SMALL**
- *Risks are independent of treatment utilized*
- *Outcomes are related to placentation*

# Conclusions

- *Genetics of infertility appears to be a major contributor that may alter methylation and gene expression*
- *Supraphysiologic hormonal states may be a contributor*
  - *Altered methylation*
  - *Reprogramming the placenta to maintain a high hormonal state*
  - *Impacting trophoblast invasion and migration*
- *Multi-omics suggest genetics/epigenetics are impacting mitochondrial genes in the first trimester placenta*

# Future Directions- Infertility Etiology





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