What is an adjuvant therapy?

Adjuvant therapy, also known as adjunct therapy, or ‘add-ons’, comprises a group of medical interventions that are given alone or in combination in addition to the standard IVF treatment. It is important to note that for many of these add-ons there is little or no evidence of their effectiveness to improve live birth rates. Nevertheless, your fertility specialist may decide to offer these treatments to individualise the care of your IVF treatment.

Monash IVF has made several fact sheets on add-ons to help you make a fully informed decision. Before you agree, you will need to weigh the evidence that this add-on may help you against the side effects it may cause, the known risks to mother and baby, as well as the extra costs.

Who may recommend an adjuvant therapy to you?

Your Fertility Specialist will discuss and recommend any adjuvant therapies they feel may be appropriate for the treatment you are going to undertake. If recommended, these therapies will be individualised to compliment your fertility treatment cycle.

Aspirin

What is Aspirin normally used for?

Aspirin is known as a salicylate and a nonsteroidal anti-inflammatory drug (NSAID). Aspirin is used to reduce fever and relieve mild to moderate pain from conditions such as muscle aches, toothaches, common cold, and headaches. Low dose aspirin (LDA) is also used to alter the function of platelets and reduce clotting in patients who have experienced heart attack and stroke.

In addition, LDA is sometimes recommended in pregnancy to reduce risk of preeclampsia and fetal growth restriction in high-risk women to improve placental blood flow.

Why is Aspirin used in IVF?

LDA has been studied in recurrent miscarriage and is thought to be of benefit when combined with low-molecular weight heparin (Clexane) in women with anti-phospholipid syndrome (APLS). Some researchers have also suggested that LDA may improve blood flow to the uterus and endometrium by causing vasodilation and reducing platelet stickiness, thus also improving implantation of an embryo.

Will using Aspirin increase my chance of success?

LDA has been extensively studied to assess whether it improves outcomes in patients experiencing recurrent IVF failure, implantation failure and recurrent miscarriage. To date there is insufficient evidence from moderate sized studies and meta-analyses to show that LDA used in an IVF cycle improves the chance of pregnancy in the general population. It's use is therefore only recommended in women diagnosed with anti-phospholipid syndrome.

Is the use of Aspirin in IVF an off-label prescription?

Yes. This means its use in IVF is not an authorised use of this medication.

Are there any side effects and risks with using Aspirin?

Common side effects can include:

- rash
- gastrointestinal ulcerations and gastritis
- abdominal pain
- upset stomach
Common side effects continued:

- heartburn
- headache
- nausea
- increased bleeding and bruising
- Aspirin may exacerbate asthma symptoms in susceptible asthma sufferers - please inform your Fertility specialist if you have Asthma

Are there any risks to the safety of a baby by using Aspirin during pregnancy?

Aspirin is a Category A drug in pregnancy meaning that it is safe and will not cause abnormalities in the fetus. It is used extensively in pregnancy for prevention of pregnancy complications.

Other important information/WARNING:
Please ensure that you do not take Aspirin before an egg collection procedure as it may increase the risk of ovarian and vaginal bleeding. It is recommended that you are not on Aspirin for 10 days leading up to any surgical procedures.

What are the costs?

Your Fertility Specialist will provide you with a prescription to obtain any medications which have been prescribed to you. The cost of these medications may vary from pharmacy to pharmacy, however these costs are in addition to your treatment cycle.

What do I do if I have more questions?

If you have any questions or require further information, please contact your Fertility Specialist.
