

# Clinical Trial Protocol

## Iranian Registry of Clinical Trials

10 Jun 2026

### Effect of intrauterine injection of chorionic gonadotropin hormon before transfer of fresh and freezee mbryo on outcome of IVF and ICSI

#### Protocol summary

##### Study aim

Effect of intrauterine injection of chorionic gonadotropin hormon before transfer of fresh and freezee mbryo on outcome of IVF and ICSI

##### Design

Random Assignment to Intervention and Control Groups by Randomized Double-Blind Randomized Blocking Sample Size 416 .

##### Settings and conduct

This is a double blind randomized clinical trial (doctor and patient unaware). The method of assigning patients to treatment groups is randomly assigned to treatment groups and individuals will be assigned to groups. Patients are divided into two groups of embryo transfer. The new transition group uses three protocols for IVF readiness based on age and patient diagnosis. Endometrial preparation freeze embryo transfer cycles are performed with one of the three protocols of hormone therapy, natural or ovarian stimulation depending on each patient's condition. Preparation of hcg for intrauterine injection before transfer to control group is done by adding HCG500IU to .40 µl of media. In the control group, the same volume of media is injected alone in the intervention group. After 4 minutes, transplanted one or two embryo is performed by abdominal sonography . 600 mg of vaginal urethrogestan is given daily for luteal phase support.

##### Participants/Inclusion and exclusion criteria

Infertile women (18-42 years old) with a history of infertility due to unspecified or male infertility who are referred to IVF-ICSI for treatment and undergo IVF-ICSI cycle -no severe oligospermia - no uterine anomaly or no uterine surgery Exclusion criteria: patient's unwillingness to continue the cycle - lack of endometrial thickness inappropriate for transfer - lack of quality A or B embryos for transfer

##### Intervention groups

Women undergoing embryo transfer cycle receive intrauterine injection of HCG

#### Main outcome variables

Clinical pregnancy rate ,chemical pregnancy rate

#### General information

##### Reason for update

##### Acronym

##### IRCT registration information

IRCT registration number: **IRCT20181030041503N2**

Registration date: **2020-03-05, 1398/12/15**

Registration timing: **registered\_while\_recruiting**

Last update: **2020-03-05, 1398/12/15**

Update count: **0**

##### Registration date

2020-03-05, 1398/12/15

##### Registrant information

##### Name

Malihe Mahmoudinia

##### Name of organization / entity

##### Country

Iran (Islamic Republic of)

##### Phone

+98 51 3882 9878

##### Email address

mahmoudiniam@mums.ac.ir

##### Recruitment status

**Recruitment complete**

##### Funding source

##### Expected recruitment start date

2020-02-04, 1398/11/15

##### Expected recruitment end date

2020-07-05, 1399/04/15

##### Actual recruitment start date

empty

##### Actual recruitment end date

empty

**Trial completion date**

empty

**Scientific title**

Effect of intrauterine injection of chorionic gonadotropin hormon before transfer of fresh and freezee mbryo on outcome of IVF and ICSI

**Public title**

Effect of intrauterine injection of chorionic gonadotropin hormon before transfer of fresh and freezee mbryo on outcome of IVF

**Purpose**

Treatment

**Inclusion/Exclusion criteria****Inclusion criteria:**

Age 18-42 years A history of infertility for unknown reasons or male factor Indication for IVF

**Exclusion criteria:**

SEVER OLIGOSPERMIA Uterine abnormality Uterine Surgery History

**Age**

From **18 years** old to **42 years** old

**Gender**

Female

**Phase**

N/A

**Groups that have been masked**

- Participant
- Care provider
- Investigator
- Outcome assessor

**Sample size**

Target sample size: **416**

**Randomization (investigator's opinion)**

Randomized

**Randomization description**

Allocation blocks will be used to assign treatment to the two groups, in which the new transfer group will specify the control group with the letter a and the intervention group with the letter b, each block size 4, the number of blocks 26 and the number of permutations. There are 4 possible cases. Then random number table] or using simulation software in runif (26, min = 1, max = 4) [R, select 26 random numbers and fill 26 blocks of states.

The same goes for the Freeze groupgroups

**Blinding (investigator's opinion)**

Triple blinded

**Blinding description**

Patient is unaware of treatment - doctor who performing transfer not aware of fluid that injected into uterus .Fluid delivered to physician based on randomized list - Analysistt not aware of treatment

**Placebo**

Used

**Assignment**

Parallel

**Other design features****Secondary Ids**

empty

**Ethics committees****1****Ethics committee****Name of ethics committee**

Mashhad university of Medical sciences Ethics committee

**Street address**

Vice Chancellor Of Research,Mashhad University of Medical Sciences ,Mashhad University of Medical Sciences,University Avenue ,Mashhad

**City**

mashhad

**Province**

Razavi Khorasan

**Postal code**

9138813944

**Approval date**

2019-12-05, 1398/09/14

**Ethics committee reference number**

IR.MUMS.MEDICAL.REC.1398.708

**Health conditions studied****1****Description of health condition studied**

Feresh and freeze transfer after intraurtrine HCG injection

**ICD-10 code**

N98.3

**ICD-10 code description**

Complications of attempted introduction of embryo in embryo transfer

**Primary outcomes****1****Description**

Chemical pregnancy rate

**Timepoint**

2weeks after embryo transfer

**Method of measurement**

βHCG test

**2****Description**

Clinical pregnancy rate

**Timepoint**

6 week after embryo transfer

**Method of measurement**

sonography

**Secondary outcomes**

## 1

### **Description**

Ongoing pregnancy

### **Timepoint**

Continued pregnancy up to 12

### **Method of measurement**

Trans vaginal Sonography

## **Intervention groups**

## 1

### **Description**

Intervention group: Intervention group: In the fresh transfer group based on age and patient diagnosis, three protocols for IVF preparation are used. In the long-acting GnRH agonist method, 500 micrograms of subcutaneous GnRH analogue (buserelin, supernatant) is started on day 21 of the preceding cycle and is reduced to 200 micrograms from the second day of the analogue dose cycle. In the micro-dose method, the supernatant begins the second day of the cycle. Starts. In the long-term GnRH agonist method after providing ovarian suppression according to the ultrasound view, and in other protocols, from the second or third day of the recombinant gonadotropin cycle (puregon, organon, Netherland, gonl, Merck-, Europe, ltd). , uk (serono starts) The starting dose of gonadotropins is determined by the patient's age, previous cycle, ovarian reserve. 5 days after stimulation with gonadotropins, the first ovarian monitoring is performed by ultrasound and dose adjusted as needed. HMG is added when Lh is required. When at least three follicles reach 17 mm, 10,000 units of HCG are prescribed. 36 hours after HCG administration, ovulation is performed under general anesthesia. The oocytes obtained were maintained in Cleave medium (Origio-Denmark) at 37 ° C with 26% Co and 5% o 2 and then the cumulus cells were removed around the oocyte, Finally, intracytoplasmic sperm injection is performed. Embryos are cultured in successive media. The embryos are examined daily for quality. Each blast or clavage of one or two embryos of high quality A or B is frozen to transfer selection and the other embryos are frozen. in freeze transfer group Preparation Of endometrium is performed with one of the three ;hormone therapy protocols, natural or ovarian stimulation depending on each patient's condition. Preparation of hcg for intrauterine injection prior to transfer IN BOTH intervention group is performed by adding 500 luHCG with 40 µl of media (origio.Denmark).and Before transfER injected to uterine., after 4 minutes of one or two embryo transfer with one or using a Cook (Australia) catheter and abdominal sonography. 600 mg urethrgestan for luteal phase support (utrogestan, Besins, Brussels, Belgium) is given daily vaginally. BHCG is measured 14 days after transfer. Chemical pregnancy The appearance of BHCG in the blood is 2 weeks after clinical transfusions at 6 weeks of gestation . ongoing pregnancy is continued for up to 12 weeks.

### **Category**

Treatment - Other

## 2

### **Description**

Intervention group: Intervention group: In the fresh transfer group based on age and patient diagnosis, three protocols for IVF preparation are used. In the long-acting GnRH agonist method, 500 micrograms of subcutaneous GnRH analogue (buserelin, supernatant) is started on day 21 of the preceding cycle and is reduced to 200 micrograms from the second day of the analogue dose cycle. In the micro-dose method, the supernatant begins the second day of the cycle. Starts. In the long-term GnRH agonist method after providing ovarian suppression according to the ultrasound view, and in other protocols, from the second or third day of the recombinant gonadotropin cycle (puregon, organon, Netherland, gonl, Merck-, Europe, ltd). , uk (serono starts) The starting dose of gonadotropins is determined by the patient's age, previous cycle, ovarian reserve. 5 days after stimulation with gonadotropins, the first ovarian monitoring is performed by ultrasound and dose adjusted as needed. HMG is added when Lh is required. When at least three follicles reach 17 mm, 10,000 units of HCG are prescribed. 36 hours after HCG administration, ovulation is performed under general anesthesia. The oocytes obtained were maintained in Cleave medium (Origio-Denmark) at 37 ° C with 26% Co and 5% o 2 and then the cumulus cells were removed around the oocyte, Finally, intracytoplasmic sperm injection is performed. Embryos are cultured in successive media. The embryos are examined daily for quality. Each blast or clavage of one or two embryos of high quality A or B is frozen to transfer selection and the other embryos are frozen. in freeze transfer group Preparation Of endometrium is performed with one of the three ;hormone therapy protocols, natural or ovarian stimulation depending on each patient's condition. Preparation of hcg for intrauterine injection prior to transfer IN BOTH intervention group is performed by adding 40 µl normalsalin as plasebo Before transfER injected to uterine., after 4 minutes of one or two embryo transfer with one or using a Cook (Australia) catheter and abdominal sonography. 600 mg urethrgestan for luteal phase support (utrogestan, Besins, Brussels, Belgium) is given daily vaginally. BHCG is measured 14 days after transfer. Chemical pregnancy The appearance of BHCG in the blood is 2 weeks after clinical transfusions at 6 weeks of gestation . ongoing pregnancy is continued for up to 12 weeks.

### **Category**

Treatment - Other

## **Recruitment centers**

## 1

### **Recruitment center**

#### **Name of recruitment center**

Milad Infertility center

#### **Full name of responsible person**

Maliyh Mahmoudinia

#### **Street address**

Milad Infertility center, Mashhad, Khorasan Razavi

**City**  
Mashhad  
**Province**  
Razavi Khorasan  
**Postal code**  
9135913556  
**Phone**  
+98 51 3853 4021  
**Email**  
mahmoudiniam941@mums.ac.ir

## Sponsors / Funding sources

### 1

#### Sponsor

**Name of organization / entity**  
Mashhad University of Medical Sciences  
**Full name of responsible person**  
Dr.Mohsen,Tafaghodi  
**Street address**  
Vice Chancellor Of Research,Mashhad University of  
Medical Sciences ,Mashhad University of Medical  
Sciences,University Avenue ,Mashhad  
**City**  
Mashhad  
**Province**  
Razavi Khorasan  
**Postal code**  
9138813944  
**Phone**  
+98 51 3841 1538  
**Email**  
Tafaghodim@mums.ac.ir

#### Grant name

#### Grant code / Reference number

#### Is the source of funding the same sponsor organization/entity?

Yes

#### Title of funding source

Mashhad University of Medical Sciences

#### Proportion provided by this source

100

#### Public or private sector

Public

#### Domestic or foreign origin

Domestic

#### Category of foreign source of funding

*empty*

#### Country of origin

#### Type of organization providing the funding

Academic

## Person responsible for general inquiries

#### Contact

**Name of organization / entity**  
Mashhad University of Medical Sciences  
**Full name of responsible person**  
Malihe Mahmoudinia  
**Position**  
Assistant Professor

**Latest degree**  
Subspecialist  
**Other areas of specialty/work**  
Gynecology and Obstetrics  
**Street address**  
Milad Fertility Clinic, East Razi Street, Dah e Day  
Square,  
**City**  
Mashhad  
**Province**  
Razavi Khorasan  
**Postal code**  
9178631973  
**Phone**  
+98 51 3853 4021  
**Email**  
MahmoudiniaM@mums.ac.ir

## Person responsible for scientific inquiries

#### Contact

**Name of organization / entity**  
Mashhad University of Medical Sciences  
**Full name of responsible person**  
Nayyereh khadem  
**Position**  
professor of gynecology group  
**Latest degree**  
Specialist  
**Other areas of specialty/work**  
Gynecology and Obstetrics  
**Street address**  
Emam Reza Hospital, Ebne Sina Street  
**City**  
Mashhad  
**Province**  
Razavi Khorasan  
**Postal code**  
9178631973  
**Phone**  
+98 51 3801 2607  
**Email**  
khademn@mums.ac.ir

## Person responsible for updating data

#### Contact

**Name of organization / entity**  
Mashhad University of Medical Sciences  
**Full name of responsible person**  
Malihe Mahmoudinia  
**Position**  
Assistant Professor  
**Latest degree**  
Subspecialist  
**Other areas of specialty/work**  
Gynecology and Obstetrics  
**Street address**  
Milad Fertility Clinic, East Razi Street, Dah e Day  
Square,  
**City**

Mashhad

**Province**

Razavi Khorasan

**Postal code**

9178631973

**Phone**

+98 51 3853 4021

**Email**

MahmoudiniaM@mums.ac.ir

**Sharing plan**

**Deidentified Individual Participant Data Set (IPD)**

Undecided - It is not yet known if there will be a plan to make this available

**Study Protocol**

Undecided - It is not yet known if there will be a plan to make this available

**Statistical Analysis Plan**

Undecided - It is not yet known if there will be a plan to make this available

**Informed Consent Form**

Undecided - It is not yet known if there will be a plan to make this available

**Clinical Study Report**

Undecided - It is not yet known if there will be a plan to make this available

**Analytic Code**

Undecided - It is not yet known if there will be a plan to make this available

**Data Dictionary**

Undecided - It is not yet known if there will be a plan to make this available