

Virtual sonographic hysteroscopy in assisted reproduction: A retrospective cost-effectiveness analysis.

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ABSTRACT

OBJECTIVE: To analyze the cost-effectiveness of virtual sonographic hysteroscopy (VSH) performed before in vitro fertilization (IVF) (Scenario 1), frozen embryo transfer (Scenario 2), and oocyte donation (Scenario 3) attempts.

METHODS: A retrospective analysis of data extracted from patients' files was conducted. Before undergoing the assigned treatment, VSH was offered to all patients. Cost-effectiveness was calculated on the basis of cost per live birth. The total cost was compared with a control group of patients who declined to have hysteroscopy before their treatment.

RESULTS: A total of 292 women were involved. Virtual sonographic hysteroscopy was performed in 192 women. Conventional operative hysteroscopy was subsequently required in 34 of them (17.7%). Subsequent assisted reproduction attempts resulted in live birth in 111 women-34/69 (49.3%), 35/69 (50.7%), and 42/54 (77.8%) in Scenarios 1, 2, and 3, respectively. This compared favorably with 100 women who declined VSH, with live birth achieved in 15/39 (38.5%), 14/37 (37.8%), and 15/24 (62.5%) in Scenarios 1, 2, and 3, respectively. The overall cost-effectiveness of VSH compared favorably with straightforward treatment performed without this test.

CONCLUSION: The overall cost-effectiveness of treatment attempts carried out after previous VSH compared favorably with straightforward treatment performed without this test.