Is endometrial withdrawal bleeding necessary prior to ovulation induction with clomiphene citrate?; A randomized controlled trial and feasibility study

Published: 29-04-2016 Last updated: 20-04-2024

To evaluate the effects of withholding progesterone-induced endometrial withdrawal bleeding before ovulation induction on the time to pregnancy and the ongoing pregnancy rate.

Ethical review Approved WMO **Status** Recruitment stopped

Health condition type Sexual function and fertility disorders

Study type Interventional

Summary

ID

NL-OMON43480

Source

ToetsingOnline

Brief title

Stair Step Study

Condition

Sexual function and fertility disorders

Synonym

PCOS/non-PCOS, WHO 2 ovulation disorders

Research involving

Human

Sponsors and support

Primary sponsor: Radboud Universitair Medisch Centrum

Source(s) of monetary or material Support: Ministerie van OC&W

1 - Is endometrial withdrawal bleeding necessary prior to ovulation induction with c ... 15-06-2025

Intervention

Keyword: clomiphene citrate, ovulation induction, withdrawal bleeding

Outcome measures

Primary outcome

The primary endpoints are the time to pregnancy and ongoing pregnancy rate within a treatment horizon of 3 cycles.

Secondary outcome

Secondary endpoints include time to ovulation, endometrial thickness, multiple pregnancy and the incidence of treatment failure.

Study description

Background summary

There is some information suggesting that a progesterone-induced withdrawal bleeding before the start of ovulation induction in women suffering from oligoor amenorrhea reduces pregnancy and live birth rate.

Study objective

To evaluate the effects of withholding progesterone-induced endometrial withdrawal bleeding before ovulation induction on the time to pregnancy and the ongoing pregnancy rate.

Study design

Prospective multicenter randomized controlled feasibility study

Intervention

Patients will be randomized to receive one of the following two treatments: Stair step group: blind start ovulation induction (no progesterone induced withdrawal bleeding and stair step protocol in case of treatment failure. Control: standard care; a progesterone induced withdrawal bleeding in case of no spontaneous menses before starting an ovulation induction cycle and in

between anovulatory cycles.

Study burden and risks

The number of site visits or physical examinations will not differ from accepted clinical practice.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years) Elderly (65 years and older)

Inclusion criteria

WHO classification category 2 PCOS or non-PCOS Age between 18 - 41 years Patent Fallopian tubes, proven by hysterosalpingography (HSG), a negative Chlamydia antibody titre (CAT) or diagnostic laparoscopy combined with tubal testing (DLS and TT), depending on the local protocol.

BMI < 40 kg/m2

Exclusion criteria

BMI > 40 kg/m2

Previous unsuccessful ovulation induction cycles with clomiphene citrate

Double-sided tubal pathology

Moderate - severe male infertility (TMSC < 3 million)

Grade III/IV endometriosis

Study design

Design

Study type: Interventional

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Open (masking not used)

Control: Active

Primary purpose: Treatment

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 21-06-2016

Enrollment: 42

Type: Actual

Ethics review

Approved WMO

Date: 29-04-2016

Application type: First submission

Review commission:

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register ID

CCMO NL56254.091.15