Missing studies: obstetric and perinatal outcomes

Sir,
We read with great interest the review by Pandey et al. (2012) about obstetric and perinatal outcomes in singleton pregnancies resulting from IVF/ICSI showing that in them perinatal outcomes were somewhat worse than those of control pregnancies. However, the review omitted our study which is one of the largest cohort studies (n = 4559 including 2930 singletons) on health of IVF/ICSI children, published in two papers (Klemetti et al., 2005, 2006). We compared IVF/ICSI children to children born after spontaneous conception adjusting for mother’s age, living area, marital status, parity and socioeconomic position. The Shilpi et al. review confirms our findings that IVF/ICSI singletons have significantly increased risks for preterm birth, low birthweight and congenital anomalies. In our study adjusted OR (95% CI) for preterm birth (<37 weeks of gestation) was 1.72 (1.51–1.96), 1.60 (1.37–1.87) for low birthweight (<2500 g), 2.06 (1.56–2.76) for very preterm (<32), 2.17 (1.64–2.88) for very low birthweight (<1500 g) and for congenital anomalies 1.30 (1.05–1.61), respectively. In addition, we found that IVF/ICSI singletons had increased risks for having special care [1.36 (1.21–1.53)], respiratory treatment [1.76 (1.34–2.31)] and hospitalization 7 or more days after the birth [1.43 (1.26–1.61)].

References

Reply: Missing studies: obstetric and perinatal outcomes

Sir,
We would like to thank Dr Klemetti for the feedback regarding our meta-analysis (Pandey et al., 2012). We would like to confirm that we did look at both the author’s papers when we performed the literature searches.

The papers were excluded for the following reasons.
In Klemetti et al. (2005), it was not possible to differentiate data for singletons.
In the other article (Klemetti et al., 2006) there was separate data for singleton births, however, as our systematic review was on obstetric and perinatal outcomes in singleton pregnancies, we have included only those studies which have compared singleton pregnancies after IVF/ICSI versus spontaneous conception rather than children after IVF/ICSI and spontaneous conceptions. We excluded Sutcliffe et al. (2001) on the same account.

However, we would like to acknowledge that Klemetti et al. (2006) should have been on the list of excluded studies with reasons given; however, it is not in the published version, despite it being on our excluded articles folder. We apologize for this oversight.

References