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SPIRONOLACTONE USE DURING CONTROLLED OVARIAN STIMULATION: AN ANALYSIS OF CLINICAL OUTCOMES

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Title:

SPIRONOLACTONE USE DURING CONTROLLED OVARIAN STIMULATION: AN ANALYSIS OF CLINICAL OUTCOMES

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Preferred Presentation Type:

Oral or Poster

Study Type:

Retrospective Cohort Study (includes comparator groups)

Category - Subcategory(ies):

ART: Clinical

ART: Outcomes

Funding:

NA

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ACCME Disclosure

Nothing to disclose. No off-label or otherwise non-approved product use.

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Applying for an award

Trainee: Yes

Abstract Category:

All Other Categories

Applied for the Resident In-Training Award

Applied for the In-Training Award for Research

Abstract Text:

OBJECTIVE: Spironolactone, a potassium-sparing diuretic with anti-androgenic and teratogenic properties, is frequently prescribed to reproductive-age women for acne and hyperandrogenism. While prior studies show no adverse effects on oocyte cryopreservation, its impact on subsequent oocyte thaw and IVF outcomes is unclear. This study investigates the association between spironolactone exposure—before or during controlled ovarian stimulation—and clinical outcomes.

MATERIALS AND METHODS: This retrospective cohort study (2011–2025) assessed IVF outcomes in patients exposed to spironolactone before or during controlled ovarian hyperstimulation, excluding those with ovarian pathology, surgery, chemotherapy, radiation, or testosterone therapy. Exposed patients were matched to unexposed controls by age, BMI, and AMH. The primary outcome was embryo blastulation rate; secondary outcomes included oocyte thaw survival, fertilization, euploidy, pregnancy outcomes, and live birth. Analyses used chi-square, Kruskal-Wallis, and regression models adjusted for vitrification and thaw year, with significance set at $p < 0.05$.

RESULTS: This study included 11 spironolactone-exposed and 33 unexposed patients with comparable demographics and ovarian reserve. Oocyte retrieval and maturation were similar between groups. After adjusting for vitrification and thaw year, no significant differences were observed in oocyte thaw survival, fertilization, blastulation, euploidy, or pregnancy outcomes following single embryo transfer (Table 1).

CONCLUSIONS: No significant differences in oocyte thaw, IVF, or pregnancy outcomes were found between spironolactone-exposed and unexposed patients, regardless of timing of use. These findings suggest spironolactone does not adversely affect IVF outcomes, likely due to its limited ovarian penetration. However, due to its teratogenicity, discontinuation before embryo transfer and pregnancy remains recommended.

IMPACT STATEMENT: Spironolactone use prior to or during oocyte cryopreservation does not appear to compromise IVF treatment outcomes, supporting continued management of underlying conditions; however, discontinuation before embryo transfer and pregnancy remains advised due to potential risks.

(%)	Control (n=33)	Spironolactone (n=11)	adjusted p value
Oocyte Thaw Survival	83.5 ± 42.5	64.4 ± 30.1	0.16
Fertilization	72.2 ± 23.2	63.2 ± 27.1	0.28
Blastulation	48.5 ± 39.8	43.9 ± 23.7	0.26
	Control (n=17)	Spironolactone (n=8)	
Euploid Rate	37.0 ± 33.9	45.8 ± 43.4	0.57
	Control (n=8)	Spironolactone (n=4)	
Positive Pregnancy Test	8 (100)	2 (50)	0.77
Clinical Pregnancy	7 (87.5)	2 (50)	0.2

Loss	1 (12.5)	1 (25)	0.52
Ongoing Pregnancy/LB	6 (75)	1 (25)	0.41

First Presenting Author**Presenting Author**

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Within the past 2 years, have you or your spouse/partner had any potential COI?

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Biographical Sketch Early success, marked by his first publication in CELL at Harvard Medical School, inspired Joseph to continue his research endeavors in reproductive endocrinology and infertility. Joseph has been with Reproductive Medicine Associates of New York since 2011. Joseph has authored over 400 peer-reviewed abstracts & manuscripts. Passionate about development, he cultivates relationship with investors & entrepreneurs to advance reproductive endocrinology & infertility care.

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Biographical Sketch Dr. Tia Jackson-Bey is a reproductive endocrinologist and infertility specialist who cares for patients at RMA of New York in Brooklyn, New York and an assistant professor of Obstetrics, Gynecology and Reproductive Science at the Icahn School of Medicine at Mount Sinai. She is board certified in OB/GYN and REI. Dr. Jackson-Bey's professional interests include providing fertility related education, advocating for those affected by infertility, and mentoring the next generation of reproductive health providers. Dr. Jackson-Bey completed her undergraduate education at Vanderbilt University in Tennessee. She earned her medical degree from the University of Cincinnati College of Medicine, while simultaneously completing her Master's in Public Health from New York Medical College School of Health Behavior and Practice. Dr. Jackson-Bey completed her residency in Obstetrics and Gynecology at Duke University Medical Center and joined RMA of New York after finishing her fellowship in Reproductive Endocrinology and Infertility at University of Illinois at Chicago. Dr. Jackson-Bey is passionate about reproductive justice and increasing access to fertility care for all. She works with various organizations and medical societies to enhance fertility options for underrepresented minorities, reduce health disparities and improve access to care. She was appointed to the Diversity, Equity, and Inclusion (DEI) Task Force, now formal Committee of the American Society for Reproductive Medicine (ASRM). She holds leadership roles the health disparities and access to care special interest groups in ASRM. She has presented nationally at ASRM, NMA, ACOG, and APGO-CREOG on a variety of fertility related topics. She is often featured on media-television, podcasts, print- as a content expert in reproductive medicine.

Dr. Jackson-Bey is a dedicated fertility expert, who is committed to family building, fertility preservation, reproductive awareness, and great outcomes for all patients.

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Organization Name	Relationship Type	Who has this Relationship?	
Progyny	Company Officer Relationship Began - Friday, August 25, 2017 Relationship Ended - Thursday, June 1, 2023 Paid Consultant Relationship Began - Relationship Ended - Direct Stockholder Relationship Began - Friday, August 25, 2017 Relationship Ended - Friday, November 1, 2024	Self	

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 [Alan B. Copperman M.D. - CV \(March 2024\).docx](#)

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