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Progesterona para bloqueio hipofisário na indução da ovulação – possibilidades de emprego

Isabela Ribeiro Diogo¹ , Renata Oliveira Soares¹ , Vanessa Wolff Machado¹ 

¹ Escola Superior de Ciências da Saúde, Brasília, Distrito Federal, Brasil.

Correspondência: isabeladiogo@hotmail.com

RESUMO

Os protocolos convencionais de reprodução assistida utilizam análogos do hormônio liberador de gonadotrofinas (GnRH) nas etapas de supressão pituitária, entretanto, possuem limitações (efeitos colaterais gerados, custo elevado, necessidade de injeções subcutâneas e longo tempo de estimulação). O objetivo desse trabalho foi apurar as possibilidades de emprego dos progestagênicos na estimulação ovariana controlada como uma opção para substituir os análogos do GnRH. Foi realizada uma revisão de escopo nas bases de dados MEDLINE, Biblioteca Virtual em Saúde e Science Direct. Foram selecionados artigos publicados de janeiro/2015 a maio/2022, sem restrição de idioma. 35 estudos foram selecionados. Progestinas avaliadas: acetato de medroxiprogesterona, didrogesterona, desogestrel e progesterona natural micronizada em diferentes concentrações. Quinze estudos compararam o protocolo com preparado de progestinas (PPOS) com os antagonistas do GnRH, 6 compararam o PPOS com os agonistas do GnRH, 14 avaliaram o uso de diferentes progestinas ou com outra dosagem da mesma progestina ou com o citrato de clomifeno. As pesquisas incluídas envolveram 11.684 pacientes com idade média de 30 anos, ciclo menstrual regular nos últimos 3 meses e indicação para realização de fertilização in vitro. O protocolo PPOS se mostrou alternativa viável e efetiva para a supressão do pico do hormônio luteinizante durante a estimulação ovariana controlada, apresentando vantagens: mais amigável às pacientes, apresenta melhor custo-benefício, menos associado a efeitos adversos, taxas reduzidas de Síndrome da Hiperestimulação Ovariana, além de ser altamente comparável com o protocolo convencional quanto ao número de óócitos obtidos e ao desfecho gestacional.

Palavras-chave: Progesterona; Fertilização in vitro; Supressão pituitária; Estimulação ovariana preparada com progestinas; Coleta de óócitos.

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