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A non-random prospective cohort study of the impact of endometrial CD138+ cell count and endometrial microbiota on fertility treatment outcomes

[Objective]

Recently, some reports suggested that endometrial microbiota and chronic endometritis (CE) may be a cause of repeated implantation failure, and many fertility clinics have introduced these tests. However, there are still many unknowns, and the accumulation of additional studies are urgently needed.

[Methods]

The fertility outcomes were followed prospectively for 49 patients who wanted to take endometrial flora analysis and CD138 immunostaining while attending our clinic since November 2018.

[Results]

Of the 49 patients, 8 (16.3%) had extremely low levels of bacterial DNA that could not be analyzed. 19 (46.3%) did not diagnose as CE with either test, and 5 (26.3%) had non-Lactobacillus dominant microbiota (NLDM). 3 (7.3%) were CE with only the CD138, and all patients had Lactobacillus dominant microbiota. 17 (41.5%) were CE with only microbiota analysis, and 10 (58.8%) were NLDM. Only two patients were CE with both tests, and both patients were NLDM. Of the 35 patients with CE or NLDM diagnosed by either method, only 10 (28.6%) requested a repeat examination. The pregnancy outcomes in each group were confirmed by Kaplan-Meier curves, and there were no significant differences.

[Conclusion]

In this study, no association was found between the number of CD138+ cells or the proportion of Lactobacillus spp. in the endometrium microbiota and the pregnancy outcome. Although the previous report was not replicated and the problem of a limited number of cases wanting to be retested due to the high cost and invasiveness of testing needs to be resolved.