aneuploidy rates of the chromosome 18 in the embryos from translocation carriers. We suggest that the analysis of both the chromosomes of related and unrelated translocations, such as comparative genomic hybridization and DNA microarray, might be important and valuable for the successful pregnancy with normal karyotype in PGD for translocation carriers.

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Prognostic Implication of Serum Vascular Endothelial Growth Factor Levels Measured on the Day of hCG in Superovulation with Intrauterine Insemination Cycle

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**Background & Objectives:** To investigate whether serum levels of vascular endothelial growth factor (VEGF) reflects outcomes of superovulation and predicts pregnancy in intrauterine insemination (IUI).

**Method:** Thirty-one infertile couples were included with a duration of infertility of one year or more. Superovulation was performed using clomiphene (100 mg/d on day 3~7) in combination with human menopausal gonadotropin (150 IU every other day starting on day 5). When mature leading follicle reached 19 mm in diameter and the urinary LH test was negative, urinary hCG 5,000 IU was given, and then IUI was performed 36~40 hrs later. Blood were drawn on the day of hCG, and the concentrations of serum estradiol and progesterone were measured using a radioimmunoassay kit. Serum VEGF-A concentrations were measured by ELISA.

**Results:** Serum VEGF levels were similar between pregnant (n=7) and non-pregnant group (n=24). A logistic regression analysis revealed that serum VEGF levels are only associated with mature follicle count.

**Conclusions:** A negative correlation between serum VEGF levels and mature follicle count indicates that serum VEGF levels are predictor for superovulation outcome in IUI cycles.