Please find below a protocol developed by Dr. George Grunert of Houston for doing an EFT in an E-P cycle that more closely mimics an IVF cycle. You may find this a more accurate way to do the EFT if the patient is anticipating doing IVF compared to a natural cycle.

I give patients vaginal estradiol (Estrace 2 mg) once daily on days 3 to 6, twice daily on days 7 to 10, and then three times daily.

I do an ultrasound on day 14 to look at endometrial thickness. It should be at least 7 mm thick. If it is, I also draw blood for estradiol and progesterone levels - to make sure that the estradiol is being absorbed and that spontaneous ovulation has not occurred.

I then continue the estradiol and add vaginal progesterone (Prometrium 100mg) once daily for 4 days, and then twice daily. I time the progesterone so that I can do an endometrial biopsy for EFT on the 11th or 12th day of progesterone (corresponding to day 24 or 25 of the cycle). On the day of the biopsy, I draw estradiol and progesterone levels again. If the EFT is abnormal, we may be able to see which hormone to change to improve the EFT results. Once I do the biopsy, I stop the estradiol and progesterone.

For additional questions, please contact Dr. Grunert at:

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