

New fertility research compares recovery timelines after early pregnancy loss in IVF patients

Emerging evidence shows recovery after early IVF pregnancy loss differs by management, improving patients' decisions and provider treatment.



SAN ANTONIO, TX, UNITED STATES,

October 29, 2025 /EINPresswire.com/ -- A new study from [US Fertility](#) examined the pregnancy hormone hCG and the duration of its return to undetectable levels after early pregnancy loss in IVF patients — and found that recovery time differs depending on the care management approach. The findings, presented at the 81st ASRM Scientific Congress & Expo, will inform patient counseling and management after miscarriage in IVF pregnancies.

Researchers compared three strategies: allowing the body to resolve the miscarriage on its own, using medication to help the uterus pass tissue, and undergoing a surgical procedure known as dilation and curettage (D&C).

The retrospective cohort study evaluated 314 patients with single, euploid frozen embryo transfer cycles ending in missed abortion before 10 weeks' gestation. Of those, 120 underwent expectant management, 108 medical management, and 86 surgical management.

Key findings include:

Median time from diagnosis to undetectable hCG was 29 days (expectant), 34 days (medical), and 42 days (surgical).

When outcomes were stratified by gestational age:

At 6-7 weeks, medical and surgical management had comparable resolution times, while expectant management took significantly longer.

At 7-8 weeks, medical management was significantly faster than surgical management, while expectant management again took significantly longer.

Biological mechanisms may explain this difference: uterine contractions triggered in medical management may promote more complete tissue clearance than surgical approaches.

“Our results demonstrate that at certain gestational ages, medical management can allow for faster resolution of hCG compared to surgical treatment,” says Atoosa Ghofranian, M.D., lead author and Reproductive Endocrinology and Infertility Fellow at RMA of New York. “Recognizing these differences are important for both patients and providers when choosing the management approach that best aligns with medical and emotional needs.”

“This study provides valuable evidence to guide clinical decision-making and patient conversations after early pregnancy loss,” says [Phillip Romanski, M.D., M.Sc.](#), Associate Research Director for US Fertility. “By understanding differences in recovery timelines, we can help patients make informed choices about the treatment path that feels right for them.”

The findings highlight that while all three management strategies are safe and effective, time-to-resolution is an important factor to consider, particularly for patients with infertility eager to move forward with future treatment.

Learn more about [US Fertility’s Research Division](#), which conducts and publishes high-quality studies to advance the field of reproductive medicine and provide better, more effective care to infertility patients.

ABOUT US FERTILITY

US Fertility, the nation’s largest partnership of physician-owned and physician-led top-tier fertility practices and IVF laboratories, are united under a shared mission to deliver the joy of parenthood through advanced reproductive medicine and innovative science. To date, US Fertility practices and laboratories have helped more than 225,000 individuals and couples build their families using assisted reproductive technology. US Fertility supports over 200 physicians by leveraging collective expertise, driving innovation, and by providing advanced business and digital solutions that streamline and enhance the delivery of exceptional patient care. Together with a growing suite of life science services, US Fertility is expanding access to the highest quality reproductive health care across over 105 clinic locations and 35 IVF laboratories.

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