FISEVIER

Contents lists available at ScienceDirect

Clinica Chimica Acta

journal homepage: www.elsevier.com/locate/clinchim



Invited critical review

AMH: An ovarian reserve biomarker in assisted reproduction [☆]



C. Peluso ^a, F.L.A. Fonseca ^b, I.F. Rodart ^a, V. Cavalcanti ^a, G. Gastaldo ^a, D.M. Christofolini ^a, C.P. Barbosa ^a, B. Bianco ^{a,*}

ARTICLE INFO

Article history: Received 8 May 2014 Received in revised form 18 July 2014 Accepted 23 July 2014 Available online 30 July 2014

Keywords: Anti-Müllerian hormone Infertility Ovarian reserve Human reproduction

ABSTRACT

Ovarian reserve tests provide knowledge of a possible response to controlled ovarian hyperstimulation in patients undergoing assisted reproduction treatment, allowing management and alteration of treatment protocol with the appropriate dose of gonadotrophin. Several parameters have been used as predictors of ovarian response. The basal FSH serum level on the third day of the menstrual cycle seemed to be the best predictor, but with significant intraindividual variability from one cycle to another. Thus, the anti-Müllerian hormone (AMH) emerges as a new ovarian test marker. AMH is produced exclusively in the gonads, by the granulosa cells, and plays an important role in folliculogenesis, acting on the modulation of follicular recruitment in the granulosa cells in order to limit the number of recruited oocytes and to regulate the number of growing follicles and their selection for ovulation. It has been suggested that AMH is strongly associated with oocyte yield after ovarian stimulation and could therefore be capable of predicting the ovarian response and the quality of oocytes and embryos. In this review, we discuss the role of AMH in assisted reproduction outcomes.

© 2014 Elsevier B.V. All rights reserved.

Contents

1.	ntroduction	175
	.1. Objective	
2.	ackground	175
	.1. Anti-Müllerian hormone — AMH	176
	.2. Assisted reproduction treatment and AMH	177
	.3. The ovarian age	178
	.4. Measurement of AMH	179
	ucknowledgment	
	teferences	180

Abbreviations: AMH, anti-Müllerian hormone; IVF, in vitro fertilization; COH, controlled ovarian hyperstimulation; FSH, follicle-stimulating hormone; OHSS, ovarian hyperstimulation syndrome; MIS, Müllerian-inhibiting substance; bp, base pairs; mRNA, messenger RNA; mm, millimeter; AMHR, anti-Müllerian hormone receptor; PCOS, polycystic ovary; syndrome; PCO, polycystic ovary; AFC, antral follicle counting; Ser, serine; pmol/l, picomoles per liter; ng/ml, nanograms per milliliter; BMI, body mass index; LH, luteinizing hormone; SNP, single nucleotide polymorphism; ART, assisted reproduction technique; ELISA, enzyme-linked immunosorbent assay; DSL, Diagnostic Systems Laboratories; ICSI, intracytoplasmic sperm injection; AUC, area under the curve; LoD, limit of detection; LoQ, limit of quantitation.

E-mail addresses: carlapeluso@yahoo.com.br (C. Peluso), profferfonseca@gmail.com (F.L.A. Fonseca), irodart@yahoo.com.br (I.F. Rodart), vivianembc@gmail.com (V. Cavalcanti), guilherme_gastaldo@hotmail.com (G. Gastaldo), caiopb@uol.com.br (C.P. Barbosa), bianca.bianco@hotmail.com (B. Bianco).

1. Introduction

1.1. Objective

To review the role of the anti-Müllerian hormone in assisted reproduction outcomes.

2. Background

Conjugal infertility is characterized by the absence of spontaneous pregnancy after the minimum period of twelve months, with the practice of regular and unprotected intercourse [1].

^a Human Reproduction and Genetics Center, Department of Collective Health, Faculdade de Medicina do ABC, Santo André, SP, Brazil

^b Clinical Laboratory, Department of Clinical Medicine, Faculdade de Medicina do ABC, Santo André, SP, Brazil

The authors have nothing to disclose.

^{*} Corresponding author at: Avenida Príncipe de Gales, 821, Santo André, SP CEP 09060-650, Brazil. Tel./fax: +55 11 4993 5464.