

# TRAITEMENTS DE L'INFERTILITÉ ET RISQUES DE CANCER

Collège de Gynécologie CVL

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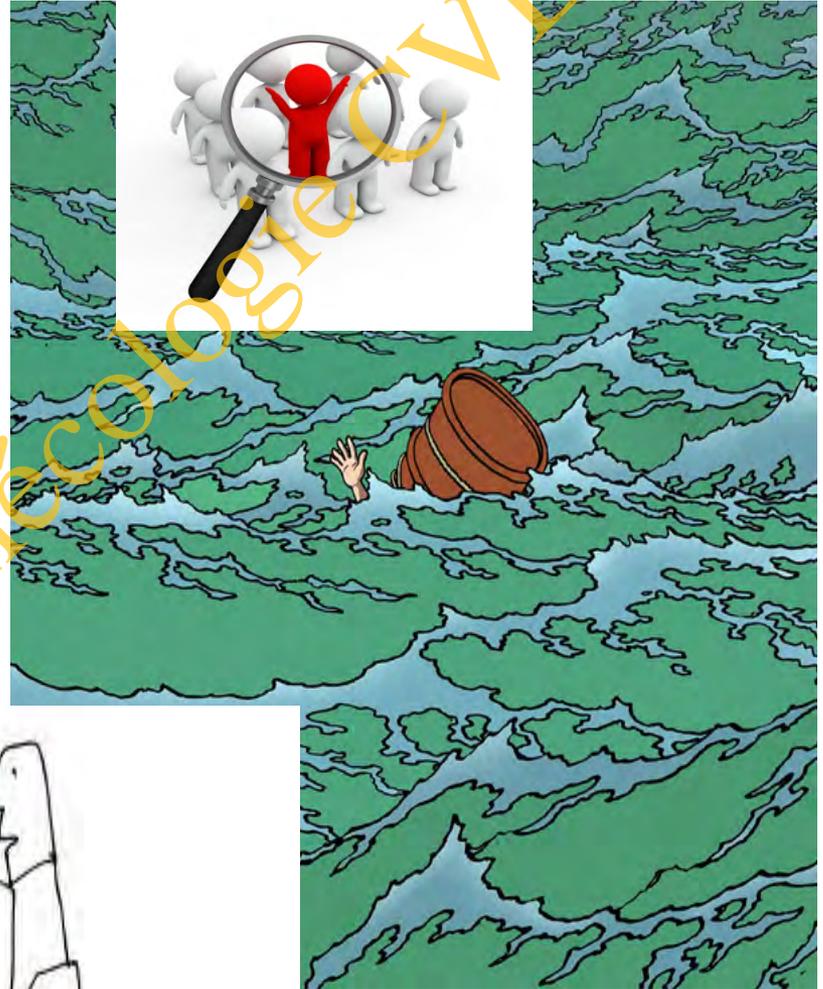
# PRESCRIPTION EN CONSTANTE AUGMENTATION

- 1.2 à 2.3 % Enfants nés par techniques PMA
- Cycles FIV en constante augmentation

Tableau AMP1. Evolution de l'activité globale d'AMP entre 2007 et 2010

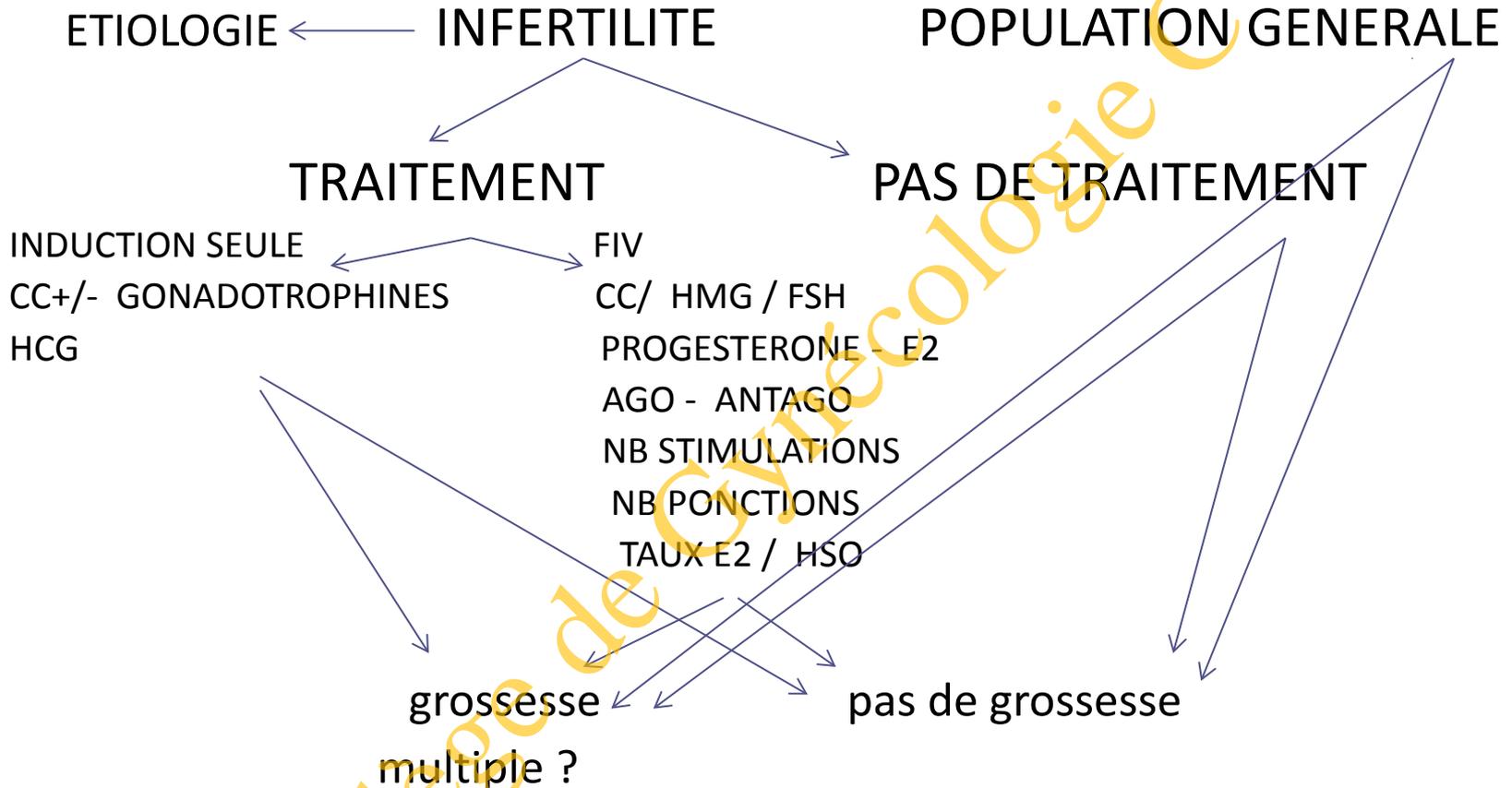
	2007	2008	2009	2010
Nombre de laboratoires d'AMP [nombre de laboratoires n'ayant pas transmis leur rapport] *	102 [1]	97 [11]	93 [4]	95 [1]
Nombre de centres clinico-biologiques [nombre de centres n'ayant pas transmis leur rapport] *	106 [0]	100 [5]	107 [0]	105 [1]
Nombre d'inséminations artificielles	54 618	53 365	57 301	60 357
Nombre de fécondations in vitro (FIV hors ICSI, ICSI, TEC)	67 438	68 150	74 415	78 987
Nombre total de tentatives**	122 056	121 515	131 716	139 344
* Nombre de centres ayant transmis un rapport annuel d'activité avant le gel de la base [Nombre de laboratoires ou centres n'ayant pas transmis le rapport annuel d'activité]				
** Tentatives : Cycles d'insémination artificielle (IIU, IIC) ; ponctions d'ovocytes dans le cadre des fécondations in vitro (FIV, ICSI) ; transferts d'embryons congelés (TEC)				

- Plus 10.000 cycles de FIV entre 2007 et 2010



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# BIAIS DE SELECTION



**durée du suivi**

( premier BB FIV 1979 )

# CANCER DE L' OVAIRE

- Prévalence France 0.2 à 0.5 ‰
- Age moyen d'apparition 65 ans
  - 7 % survenue avant 40 ans
  - 10 % survenue entre 40 et 50 ans
- Malgré grandes cohortes très faible nombre de cas
- degré de significativité non atteint
- Sous groupes faible importance

# FACTEURS DE CONFUSION

Parité

Age a la première naissance

Prématurité

allaitement

Activité physique

Hystérectomie +/-

Salpingectomie uni /bi

Ovariectomie

CO durée

niveau socio économique

Origine ethnique

BMI ↑

Hormonothérapie substitutive

Grande taille

endométriose

ATCD familiaux k ovaire

Mutation BRCA1 BRCA2

cancer colorectal héréditaire

Cancer sein ATCD personnel

tabagisme

CANCER OVAIRE

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# HISTORIQUE cancer ovaire

## AUGMENTATION significative du risque

- Whittemore 1992 526 £  
RR= 2.8 ttt RR= 27 ttt nulligeste
- Rossing 1994 3837 £  
RR= 11.1 si 12 cycles cc
- Brinton 2005 25152 £
- Källen 2011 19799 £  
OR=2.09 /pop. generale

## PAS D AUGMENTATION SIGNIFICATIVE du risque

- Franceschi 1994
- Bristow 1996
- Mosgaard 1997
- Venn 1999 29700 £
- Ness 2002
- Lerner-Geva 2003 19146 £
- Jensen 2009 54362 £
- Van leeuwen 2002-2011  
19146 £
- Brinton 2013 12193 £
- A-N Yli Kuha 2012 9175 £

# INFERTILITE

- Neutraliser l'effet confusionnel de l'infertilité  
Risque ajusté devient non significatif ?
- L'infertilité serait le facteur de risque sous jacent  
Plutôt que l'effet des traitements ?
- Surveillance nécessaire au long cours  
Certaines sous population

## Controlled ovarian hyperstimulation for IVF: impact on ovarian, endometrial and cervical cancer—a systematic review and meta-analysis

Charalampos Siristatidis<sup>1</sup>, Theodoros N. Sergentanis<sup>2†</sup>,  
Prodromos Kanavidis<sup>2†</sup>, Marialena Trivella<sup>3,4</sup>, Marianthi Sotiraki<sup>2</sup>,  
Ioannis Mavromatis<sup>2</sup>, Theodora Psaltopoulou<sup>2</sup>, Alkistis Skalkidou<sup>5</sup>,

Synthèses de 9 COHORTES

109 969 femmes

76 cancers ovaire

1 seule étude > 10 ans

**Table II Results of the meta-analyses examining the association between IVF and endometrial, ovarian and cervical cancer.**

	Ovarian cancer				Endometrial cancer				Cervical cancer			
	n <sup>a</sup>	Effect estimate (95% CI)	P	Heterogeneity I <sup>2</sup> , p <sup>b</sup>	n <sup>a</sup>	Effect estimate (95% CI)	P	Heterogeneity I <sup>2</sup> , p <sup>b</sup>	n <sup>a</sup>	Effect estimate (95% CI)	P	Heterogeneity I <sup>2</sup> , p <sup>b</sup>
Approach preferring <sup>c</sup> estimates which excluded the first year of follow-up after IVF												
Analysis versus general population	6	<b>1.50 (1.17–1.92)</b>	0.001	22.5%, 0.265	5	<b>2.04 (1.22–3.43)</b>	0.007	0.0%, 0.491	5	0.86 (0.49–1.49) <sup>R</sup>	0.585	70.2%, 0.009
Subanalysis on SIRs	4	1.19 (0.86–1.64)	0.293	0.0%, 0.679	3	<b>1.97 (1.15–3.40)</b>	0.014	33.8%, 0.221	3	1.54 (0.47–5.09) <sup>R</sup>	0.480	64.0%, 0.062
Subanalysis on ORs	2	<b>2.10 (1.43–3.10)</b>	<0.001	0.0%, 0.918	2	2.86 (0.52–15.75)	0.227	0.0%, 0.632	2	<b>0.60 (0.52–0.70)</b>	<0.001	0.0%, 0.661
Analysis versus infertile women <sup>d</sup>	2	<b>1.26 (0.62–2.55)</b>	0.521	0.0%, 0.451	2	0.45 (0.18–1.14)	0.093	0.0%, 0.789	1	5.70 (0.28–117.20)	0.259	NC, NC <sup>e</sup>
Approach preferring <sup>c</sup> estimates derived from total follow-up												
Analysis versus general population	6	<b>1.65 (1.07–2.55)<sup>R</sup></b>	0.022	52.1%, 0.064	5	<b>1.97 (1.18–3.27)</b>	0.009	0.0%, 0.553	5	0.85 (0.49–1.48) <sup>R</sup>	0.556	70.8%, 0.008
Subanalysis on SIRs	4	1.42 (0.74–2.76) <sup>R</sup>	0.294	58.1%, 0.067	3	<b>1.97 (1.15–3.40)</b>	0.014	33.8%, 0.221	3	1.54 (0.47–5.08) <sup>R</sup>	0.480	63.9%, 0.063
Subanalysis on ORs	2	<b>2.13 (1.45–3.13)</b>	<0.001	0.0%, 0.769	2	1.91 (0.46–8.04)	0.376	0.0%, 0.923	2	<b>0.60 (0.52–0.70)</b>	<0.001	0.0%, 0.518
Analysis versus infertile women <sup>d</sup>	2	1.05 (0.55–2.01)	0.874	0.0%, 0.685	2	0.45 (0.18–1.14)	0.093	0.0%, 0.789	1	5.70 (0.28–117.20)	0.259	NC, NC <sup>e</sup>

Bold cells denote statistically significant associations. All pooled effect estimates were derived from fixed-effects analyses, except for cells marked with <sup>R</sup>(random-effects). CI, confidence interval. NC, not calculable.

<sup>a</sup>Number of studies.

<sup>b</sup>P-value derived from Cochran Q statistic.

<sup>c</sup>The distinction between the two follow-up intervals (excluding first year after IVF and total) was made only in three studies (Lerner-Geva et al., 2003; van Leeuwen et al., 2011; Yli-Kuha et al., 2012).

<sup>d</sup>All analyses were based on IRRs.

ORIGINAL ARTICLE: ENVIRONMENT AND EPIDEMIOLOGY

# In vitro fertilization and risk of breast and gynecologic cancers: a retrospective cohort study within the Israeli Maccabi Healthcare Services

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2013 Fertility Sterility

Collège de Gynécologie CVL

**TABLE 2**

**Adjusted hazard ratios for breast and gynecologic cancers associated with fertility treatments.**

	Cases, n	Person-years	HR <sup>a</sup>	95% CI
<b>Breast</b>				
No fertility treatment	133	137,702	1.00	reference
Any fertility treatment	389	566,539	0.87	(0.71–1.06)
IVF	140	187,820	0.90	(0.71–1.15)
1–3 cycles	77	106,206	0.89	(0.67–1.18)
≥ 4 cycles	63	81,615	0.92	(0.68–1.24)
GnRH analogues	118	174,493	0.82	(0.64–1.05)
Clomiphene	284	426,797	0.87	(0.71–1.08)
Progestogen	278	450,928	0.80	(0.65–0.99)
<b>Endometrial</b>				
No fertility treatment	7	137,098	1.00	reference
Any fertility treatment	34	564,934	1.25	(0.55–2.84)
IVF	15	187,312	1.56	(0.63–3.86)
1–3 cycles	10	105,892	1.94	(0.73–5.12)
≥ 4 cycles	5	81,420	1.12	(0.35–3.56)
GnRH analogues	12	173,991	1.39	(0.54–3.55)
Clomiphene	20	425,861	1.01	(0.42–2.42)
Progestogen	27	449,807	1.24	(0.53–2.87)
<b>Ovarian</b>				
No fertility treatment	11	137,074	1.00	reference
Any fertility treatment	34	564,275	0.90	(0.45–1.79)
IVF	21	186,918	1.58	(0.75–3.29)
1–3 cycles	10	105,736	1.40	(0.59–3.32)
≥ 4 cycles	11	81,182	1.78	(0.76–4.13)
GnRH analogues	11	173,641	0.93	(0.40–2.16)
Clomiphene	20	425,227	0.75	(0.36–1.58)
Progestogen	23	449,283	0.77	(0.37–1.60)
<b>Cervix in situ</b>				
No fertility treatment	109	137,702	1.00	reference
Any fertility treatment	202	566,539	0.48	(0.38–0.61)
IVF	54	187,820	0.41	(0.29–0.56)
1–3 cycles	28	106,206	0.36	(0.24–0.54)
≥ 4 cycles	26	81,615	0.47	(0.31–0.72)
GnRH analogues	45	174,493	0.36	(0.25–0.50)
Clomiphene	140	426,797	0.44	(0.34–0.57)
Progestogen	142	450,928	0.42	(0.33–0.54)
<b>Cervix invasive</b>				
No fertility treatment	11	137,702	1.00	reference
Any fertility treatment	21	566,539	0.57	(0.27–1.19)
IVF	10	187,820	0.79	(0.34–1.88)
1–3 cycles	4	106,206	0.57	(0.18–1.79)
≥ 4 cycles	6	81,615	1.09	(0.40–2.96)
GnRH analogues	4	174,493	0.35	(0.53–2.87)
Clomiphene	12	426,797	0.45	(0.20–1.02)
Progestogen	10	450,928	0.34	(0.15–0.82)

Note: CI = confidence interval; HR = hazard ratio.

<sup>a</sup> Adjusted for age at entry, body mass index, smoking, parity at exit, and socioeconomic status; models included a term for the fertility treatment other than the type listed (e.g., for model of IVF treatment, model included term of IVF treatment and a term for other fertility treatment that was not IVF, so the reference was always no fertility treatment as listed).

Brinton. IVF and female cancers. *Fertil Steril* 2013.

87.403 femmes INFERTILES  
 Traitement 67608 34 cancers  
 Pas de traitement 19795 11 cancers  
 1994-2011  
 Suivi 8 ANS  
 45 cancers ovaire

AUCUN TTT D INFERTILITE NE POUVAIT  
 ETRE RELIE A UN RISQUE  
 SIGNIFICATIVEMENT AUGMENTE DE  
 CANCER DE L OVAIRE

Mais augmentation si ≥ 4 cycles FIV  
 HR 1.40 95 % CI (0.59-3.32)  
 HR 1.78 (0.76-4.13)

2002

## Risk of borderline and invasive ovarian tumours after ovarian stimulation for *in vitro* fertilization in a large Dutch cohort

2011

F.E. van Leeuwen<sup>1,\*</sup>, H. Klip<sup>1,2</sup>, T.M. Mooij<sup>1</sup>, A.M.G. van de Swaluw<sup>1,3</sup>, C.B. Lambalk<sup>4</sup>, M. Kortman<sup>5</sup>, J.S.E. Laven<sup>6</sup>, C.A.M. Jansen<sup>7</sup>, F.M. Helmerhorst<sup>8</sup>, B.J. Cohlen<sup>9</sup>, W.N.P. Willemsen<sup>10</sup>, J.M.J. Smeenk<sup>11</sup>, A.H.M. Simons<sup>12</sup>, F. van der Veen<sup>13</sup>, J.L.H. Evers<sup>14</sup>, P.A. van Dop<sup>15</sup>, N.S. Macklon<sup>6,16</sup>, and C.W. Burger<sup>6</sup>

Étude OMEGA      femmes infertiles      19.146 FIV / 6006 PAS DE FIV  
 1983 à 1995  
 moyenne de suivi **15 ans**  
 nombreux paramètres étudiés  
 42 cancers ovaire      30 FIV / 12 NON FIV

**Table II** Incidence of ovarian malignancies by years of follow up and exposure status.

Follow-up	IVF group				Non-IVF group				Total			
	Obs	Exp	SIR	95% CI	Obs	Exp	SIR	95% CI	Obs	Exp	SIR	95% CI
All ovarian malignancies												
< 1 years	6	1.52	3.94	1.44–8.57	3	0.31	9.55	1.97–27.91	9	1.84	4.90	2.24–9.30
1–4 years	9	7.52	1.20	0.55–2.27	1	1.74	0.57	0.01–3.20	10	9.27	1.08	0.52–1.98
5–9 years	16	12.41	1.29	0.74–2.09	3	3.58	0.84	0.17–2.45	19	15.99	1.19	0.72–1.86
10–14 years	18	13.22	1.36	0.81–2.15	4	4.63	0.86	0.23–2.21	22	17.85	1.23	0.77–1.87
≥ 15 years	12	3.73	3.22	1.66–5.62	5	5.36	0.93	0.30–2.18	17	9.08	1.87	1.09–3.00
All intervals	61	38.41	1.59	1.21–2.04	16	15.63	1.02	0.59–1.66	77	54.03	1.43	1.12–1.78
All intervals excl. first year	55	36.88	1.49	1.12–1.94	13	15.31	0.85	0.45–1.45	68	52.20	1.30	1.01–1.65
Invasive ovarian cancer												
< 1 years	2	0.78	2.57	0.31–9.26	3	0.16	18.35	3.79–53.60	5	0.94	5.30	1.72–12.37
1–4 years	5	3.94	1.27	0.41–2.96	1	0.93	1.07	0.03–5.97	6	4.88	1.23	0.45–2.68
5–9 years	4	6.90	0.58	0.16–1.48	2	2.03	0.99	0.12–3.56	6	8.93	0.67	0.25–1.46
10–14 years	10	8.13	1.23	0.59–2.26	2	2.85	0.70	0.09–2.54	12	10.98	1.09	0.56–1.91
≥ 15 years	9	2.54	3.54	1.62–6.72	4	3.68	1.09	0.30–2.79	13	6.22	2.09	1.11–3.57
All intervals	30	22.30	1.35	0.91–1.92	12	9.65	1.24	0.64–2.17	42	31.95	1.31	0.95–1.78
All intervals excl. first year	28	21.52	1.30	0.86–1.88	9	9.48	0.95	0.43–1.80	37	31.01	1.19	0.84–1.64
Borderline ovarian tumours												
< 1 years	4	0.74	5.38	1.46–13.77	0	0.15	0	0.00–24.59	4	0.89	4.47	1.21–11.45
1–4 years	4	3.58	1.12	0.03–2.86	0	0.81	0	0.00–4.55	4	4.39	0.91	0.25–2.33
5–9 years	12	5.51	2.18	1.13–3.81	1	1.55	0.64	0.02–3.59	13	7.06	1.84	0.98–3.15
10–14 years	8	5.09	1.57	0.68–3.10	2	1.79	1.12	0.14–4.04	10	6.87	1.45	0.70–2.68
≥ 15 years	3	1.18	2.53	0.52–7.40	1	1.68	0.60	0.02–3.32	4	2.86	1.40	0.38–3.58
All intervals	31	16.10	1.93	1.31–2.73	4	5.98	0.67	0.18–1.71	35	22.08	1.59	1.10–2.20
All intervals excl. first year	27	15.36	1.76	1.16–2.56	4	5.83	0.69	0.19–1.76	31	21.19	1.46	0.99–2.08

Obs, observed; Exp, expected; SIR, standardized incidence ratio; CI, confidence interval.

# Cancer ovarien Van Leeuwen

- Pas d'augmentation significative FIV / NON FIV

SAUF

AUGMENTATION SIGNIFICATIVE

APRES 15 ANS DE SUIVI

SIR=3.54 1.62-6.72 95% CI

(Persiste après ajustement parité et prise de co)

non retrouvé si pas de FIV

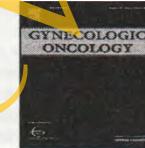
# NULLIPARITE



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## In vitro fertilization, endometriosis, nulliparity and ovarian cancer risk

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2013

Suivi=16.7 ans

**Table 1**  
Characteristics of the study population.<sup>a</sup>

Characteristic	All women in the cohort	Women undergoing infertility treatment but not IVF	Women undergoing IVF treatment
Number of women	21,646	14,098	7,548
Number of women who gave birth	14,907	10,032	4,875
Number of women diagnosed with ovarian cancer	38	22	16
Mean length of follow-up <sup>b</sup> (years)	16.9 ± 5.9	17.0 ± 5.9	16.7 ± 5.9
Total length of follow-up (years)	366,041	240,203	125,837
Mean age at start of follow-up (years)	31.2 ± 5.2	30.8 ± 5.3	32.1 ± 4.8
Mean age at first birth (years)	29.6 ± 6.0	28.3 ± 5.8	32.2 ± 5.4
Mean age at ovarian cancer diagnosis (years)	46.0 ± 7.0	46.7 ± 8.2	44.9 ± 4.8

**Table 3**  
Multivariate regression models describing the relationship between ovarian cancer and identified risk and protective factors.<sup>a</sup>

Factor	Hazard ratio (95% CI) In the whole cohort (n=21,646)	Hazard ratio (95% CI) In women who gave birth (n=14,907)	Hazard ratio (95% CI) In women who did not have a recorded birth (n=6,739)
Birth	0.49 (0.25-0.95)	-	-
IVF	1.36 (0.71-2.62)	1.01 (0.35-2.90)	1.76 (0.74-4.16)
Endometriosis	2.33 (1.02-5.35)	1.52 (0.34-6.75)	3.11 (1.13-8.57)

# Malignancies among women who gave birth after *in vitro* fertilization

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2011  
1982-2006  
1279 f FIV +cancer  
Suivi=8 ans

**Table II Risk for cancer in women before they undergo IVF and women from the general population.**

Cancer type	IVF women with cancer	All women with cancer	OR <sup>a</sup>	95% CI <sup>a</sup>
All cancers	747	19 799	1.37	1.27–1.48
Breast cancer	3	163	–	–
Cervical cancer, including cancer <i>in situ</i>	566	15 300	1.33	1.22–1.45
Ovarian cancer	29	296	3.93	2.63–5.64 <sup>b</sup>
Placental cancer	15	900	0.83	0.50–1.38
CNS cancer	21	392	2.18	1.41–3.35
Malignant melanoma	36	853	1.18	0.85–1.66
Thyroid cancer	12	268	1.66	0.92–2.99
Colon cancer	6	204	1.36	0.50–2.97 <sup>b</sup>
Other cancer	44	4796	1.10	0.81–1.50
All except ovarian cancer	718	19 503	1.33	1.24–1.44

Restricted to women who are parity I at their first pregnancy during the observation period.

<sup>a</sup>Odds ratio (OR) with 95% confidence interval (95% CI) after adjustment for year of delivery, maternal age at delivery and smoking. Number of women who underwent IVF = 18 643, the total number of women = 1 094 219.

<sup>b</sup>Relative risk (RR) calculated as observed over expected numbers, the latter estimated after adjustment as stated above.

**Table III Risk for cancer in women after they have undergone IVF and other women who have an infant during the observation period.**

Cancer type	IVF women with cancer	All women with cancer	OR <sup>a</sup>	95% CI <sup>a</sup>
All cancers	415	67 012	0.76	0.69–0.84
Breast cancer	91	13 583	0.76	0.62–0.94
Cervical cancer, including cancer <i>in situ</i>	164	33 538	0.61	0.52–0.71
Ovarian cancer	26	1779	2.09	1.39–3.12
Placental cancer	5	1236	0.28	0.12–0.64 <sup>b</sup>
CNS cancer	17	1838	1.17	0.71–1.94
Malignant melanoma	37	3654	1.06	0.76–1.48
Thyroid cancer	10	943	1.16	0.55–2.13 <sup>b</sup>
Colon cancer	11	1125	1.17	0.58–2.08 <sup>b</sup>
Other cancer	54	9349	0.79	0.60–1.04
All except ovarian cancer	389	65 233	0.70	0.63–0.78

<sup>a</sup>Odds ratio (OR) with 95% confidence interval (95% CI) after adjustment for year of delivery, maternal age at delivery and smoking. Number of women who underwent IVF = 23 192, the total number of women = 1 365 179.

<sup>b</sup>Relative risk (RR) calculated as observed over expected numbers, the latter estimated after adjustment as stated above.

# TUMEUR BORDERLINE OVAIRE

## Augmentation **significative** risque

- Rossing 1994 RR 3.3
- Sushan 1996 RR=3.5
- Parrazini 2001 RR=27.5
- Ness 2002 RR=2.43
- Sanner 2009 RR =2.62
- Van Leeuwen 2011 RR=1.93
- Stewart 2013 RR=2.46

## Pas d'augmentation de risque

- Mosgard 1997
- Yli- kuhna 2013

2002

## Risk of borderline and invasive ovarian tumours after ovarian stimulation for *in vitro* fertilization in a large Dutch cohort

2011

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Étude OMEGA	femmes infertiles	19.146 FIV / 6006 PAS DE FIV
	1983 à 1995	
	moyenne de suivi <b>15 ans</b>	
	nombreux parametres étudiés	
	35 tumeurs borderline ovaire	31 FIV / 4 NON FIV

# TUMEUR BORDERLINE OVAIRE et FIV

**Table II** Incidence of ovarian malignancies by years of follow up and exposure status.

Follow-up	IVF group				Non-IVF group				Total			
	Obs	Exp	SIR	95% CI	Obs	Exp	SIR	95% CI	Obs	Exp	SIR	95% CI
All ovarian malignancies												
< 1 years	6	1.52	3.94	1.44–8.57	3	0.31	9.55	1.97–27.91	9	1.84	4.90	2.24–9.30
1–4 years	9	7.52	1.20	0.55–2.27	1	1.74	0.57	0.01–3.20	10	9.27	1.08	0.52–1.98
5–9 years	16	12.41	1.29	0.74–2.09	3	3.58	0.84	0.17–2.45	19	15.99	1.19	0.72–1.86
10–14 years	18	13.22	1.36	0.81–2.15	4	4.63	0.86	0.23–2.21	22	17.85	1.23	0.77–1.87
≥ 15 years	12	3.73	3.22	1.66–5.62	5	5.36	0.93	0.30–2.18	17	9.08	1.87	1.09–3.00
All intervals	61	38.41	1.59	1.21–2.04	16	15.63	1.02	0.59–1.66	77	54.03	1.43	1.12–1.78
All intervals excl. first year	55	36.88	1.49	1.12–1.94	13	15.31	0.85	0.45–1.45	68	52.20	1.30	1.01–1.65
Invasive ovarian cancer												
< 1 years	2	0.78	2.57	0.31–9.26	3	0.16	18.35	3.79–53.60	5	0.94	5.30	1.72–12.37
1–4 years	5	3.94	1.27	0.41–2.96	1	0.93	1.07	0.03–5.97	6	4.88	1.23	0.45–2.68
5–9 years	4	6.90	0.58	0.16–1.48	2	2.03	0.99	0.12–3.56	6	8.93	0.67	0.25–1.46
10–14 years	10	8.13	1.23	0.59–2.26	2	2.85	0.70	0.09–2.54	12	10.98	1.09	0.56–1.91
≥ 15 years	9	2.54	3.54	1.62–6.72	4	3.68	1.09	0.30–2.79	13	6.22	2.09	1.11–3.57
All intervals	30	22.30	1.35	0.91–1.92	12	9.65	1.24	0.64–2.17	42	31.95	1.31	0.95–1.78
All intervals excl. first year	28	21.52	1.30	0.86–1.88	9	9.48	0.95	0.43–1.80	37	31.01	1.19	0.84–1.64
Borderline ovarian tumours												
< 1 years	4	0.74	5.38	1.46–13.77	0	0.15	0	0.00–24.59	4	0.89	4.47	1.21–11.45
1–4 years	4	3.58	1.12	0.03–2.86	0	0.81	0	0.00–4.55	4	4.39	0.91	0.25–2.33
5–9 years	12	5.51	2.18	1.13–3.81	1	1.55	0.64	0.02–3.59	13	7.06	1.84	0.98–3.15
10–14 years	8	5.09	1.57	0.68–3.10	2	1.79	1.12	0.14–4.04	10	6.87	1.45	0.70–2.68
≥ 15 years	3	1.18	2.53	0.52–7.40	1	1.68	0.60	0.02–3.32	4	2.86	1.40	0.38–3.58
All intervals	31	16.10	1.93	1.31–2.73	4	5.98	0.67	0.18–1.71	35	22.08	1.59	1.10–2.20
All intervals excl. first year	27	15.36	1.76	1.16–2.56	4	5.83	0.69	0.19–1.76	31	21.19	1.46	0.99–2.08

Obs, observed; Exp, expected; SIR, standardized incidence ratio; CI, confidence interval.

Van Leeuwen  
2011  
OMEGA

# TUMEURS BORDERLINE OVAIRE et FIV

- Augmentation significative dans le groupe FIV/non fiv
- Surtout la première année  
exclusion première année

SIR= 5.38	95 % CI	1.46- 13.77
SIR= 1.76		1.16 - 2.56

- Population Pays-Bas  
0.45 % DEVIENDRAIT à 0.71 % a 50 ANS  
AVEC TTT FIV
- Pas de relation avec nombre de cycles ou type de traitement  
( Sous groupes faibles étude élargie en cours )

## In vitro fertilization is associated with an increased risk of borderline ovarian tumours

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2012

**Table 2**  
Potential borderline ovarian tumour risk and protective factors.

Exposure	Number in exposed group	Crude (unadjusted) HR (95% CI) <sup>a</sup>	Adjusted HR (95% CI) <sup>b</sup>
IVF	7544	2.48 (1.22–5.04)	2.46 (1.20–5.04)
Birth <sup>c</sup>	14,902	0.70 (0.34–1.43)	0.89 (0.43–1.88)
Age at first birth			
No birth recorded	6737	1.00	1.00
Age <30 at first birth	7047	0.41 (0.15–1.13)	0.62 (0.20–1.87)
Age ≥30 at first birth	7855	1.01 (0.46–2.21)	1.05 (0.48–2.34)
High socio-economic status <sup>d</sup>	5268	0.46 (0.16–1.30)	0.36 (0.12–1.03)
Diagnoses at baseline			
PID	3885	0.94 (0.36–2.45)	0.96 (0.37–2.51)
Endometriosis	2978	0.26 (0.04–1.92)	0.31 (0.04–2.29)
Procedures			
Sterilization	3740	1.55 (0.66–3.63)	1.48 (0.63–3.48)
Hysterectomy without USO <sup>e</sup>	2186	1.01 (0.24–4.34)	1.02 (0.24–4.37)

21639 Femmes

Australie

1982-2002

Suivi=16.9 ans

31 tumeurs borderline

14095 non fiv / 14 cas

7544 fiv / 17 cas

M DG = 8.6 années

# Fertility drugs and the risk of breast cancer: a meta-analysis and review

Tony G. Zreik

Breast Cancer Res Treat (2010) 124:13–26

This meta-analysis of 23 carefully selected published case–controls (n = 8) and cohorts (n = 15) studies did not reveal an increased risk of breast cancer associated with the use of fertility drugs.

# CANCER DU SEIN

RESEARCH

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## REPRODUCTIVE ENDOCRINOLOGY AND INFERTILITY Breast cancer incidence after hormonal infertility treatment in Sweden: a cohort study

Chantal C. Orgéas, MPH; Karin Sanner, MD; Per Hall, MD, PhD; Peter Conner, MD, PhD; Jan Holte, MD, PhD; Staffan J. Nilsson, MD; Karin Sundfeldt, MD, PhD; Ingemar Persson, MD, PhD; Kee Seng Chia, MD, PhD; Sara Wedren, MD, PhD; Paul W. Dickman, PhD; Kamila Czenc, PhD

2009  
1135 femmes

**TABLE 2**  
Characteristics of the study cohort comprising 1135 women attending 3 infertility clinics in Sweden between 1961 and 1976, with follow-up to Dec. 31, 2004, by breast cancer status

Characteristic	Women without breast cancer number (range)	Women with breast cancer number (range)
Total number of patients	1081	54
Total number of person-years of follow-up	35,092	1322
Median age at start of treatment (y) (IQR)	27 (6)	28 (6)
Median age at breast cancer diagnosis (y) (IQR)	—	53 (12)
Median time from start of treatment to breast cancer diagnosis (y) (IQR)	—	26 (10)

IQR, interquartile range.

Orgéas. Breast cancer incidence after hormonal infertility treatment. *Am J Obstet Gynecol* 2009.

**TABLE 3**  
Standardized incidence ratios and 95% CI for breast cancer among women undergoing hormonal infertility treatment in Sweden between 1961 and 1976, for total follow-up period to Dec. 31, 2004, by exposure to hormonal treatment

Variable	Observed cases (n)	SIR (95% CI) <sup>a</sup>	SIR (95% CI) <sup>b</sup>
Any exposure to hormonal treatment	54	1.16 (0.89-1.52)	1.01 (0.77-1.31)
Type			
CC only	19	1.31 (0.83-2.05)	1.15 (0.73-1.80)
Gonadotropins only	9	0.63 (0.33-1.20)	0.53 (0.28-1.00)
Both (CC and gonadotropins)	26	1.48 (1.01-2.17)	1.28 (0.87-1.88)
Dose cycles (n)			
CC only, low (1-3)	7	0.91 (0.43-1.91)	0.80 (0.38-1.68)
CC only, high (4+)	12	2.15 (1.22-3.79)	1.90 (1.08-3.35)
Gonadotropins only, low (1-3)	4	0.58 (0.22-1.55)	0.49 (0.18-1.32)
Gonadotropins only, high (4+)	5	0.73 (0.30-1.76)	0.63 (0.26-1.51)

CC, clomiphene citrate; CI, confidence interval; SIR, standardized incidence ratios.

<sup>a</sup> Rates adjusted for attained age and calendar period of cancer diagnosis only. <sup>b</sup> Rates adjusted for attained age, calendar period of breast cancer diagnosis, total parity, and age at first term birth.

Orgéas. Breast cancer incidence after hormonal infertility treatment. *Am J Obstet Gynecol* 2009.

# In vitro fertilization and breast cancer: is there cause for concern?

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2012  
21025 Femmes  
infertiles fiv/ ttt  
M =17 ANS  
1983- 2002

TABLE 2

Hazard ratios for breast cancer in women undergoing infertility treatment.<sup>a</sup>

Subgroup	Hazard ratio (95% CI)
IVF (no) (reference group)	1.00
IVF (yes)	1.10 (0.88–1.36)
Age <25 y at first delivery (reference group)	1.00
Age 25–29 y at first delivery	1.35 (0.86–2.13)
Age 30–34 y at first delivery	1.75 (1.13–2.72)
Age ≥ 35 y at first delivery	1.91 (1.20–3.03)
No birth recorded	1.16 (0.75–1.78)
No multiple birth (reference group)	1.00
Multiple birth	0.69 (0.41–1.16)

TABLE 3

Age-specific estimates of the effect of IVF on breast cancer rate.<sup>a</sup>

Age at start of infertility investigation (y)	Hazard ratio (95% CI) comparing breast cancer rate in women having IVF with women not having IVF		
	Unadjusted	Adjusted for confounding by age at first birth only	Adjusted for confounding by age at first birth and multiple delivery
20	1.86 (1.06–3.25)	1.69 (0.95–2.99)	1.80 (1.01–3.20)
24	1.59 (1.05–2.42)	1.47 (0.96–2.26)	1.56 (1.01–2.40)
28	1.36 (1.02–1.83)	1.29 (0.95–1.73)	1.34 (0.99–1.82)
32	1.17 (0.95–1.45)	1.12 (0.90–1.39)	1.16 (0.93–1.45)
36	1.00 (0.79–1.27)	0.98 (0.77–1.24)	1.00 (0.79–1.27)
40	0.86 (0.61–1.20)	0.85 (0.61–1.20)	0.87 (0.62–1.22)
44	0.74 (0.46–1.18)	0.74 (0.46–1.19)	0.75 (0.47–1.20)

<sup>a</sup> Estimates derived from Cox regression models that include the interaction between IVF and age at the specific ages shown. The first column of results shows the unadjusted analysis; the second gives hazard ratios after adjusting for confounding by age at first birth only; and the final model in the third column of results shows hazard ratios after adjusting for age at first birth and multiple birth.

**Table III Risk for cancer in women after they have undergone IVF and other women who have an infant during the observation period.**

Cancer type	IVF women with cancer	All women with cancer	OR <sup>a</sup>	95% CI <sup>a</sup>
All cancers	415	67 012	0.76	0.69–0.84
Breast cancer	91	13 583	0.76	0.62–0.94
Cervical cancer, including cancer <i>in situ</i>	164	33 538	0.61	0.52–0.71
Ovarian cancer	26	1779	2.09	1.39–3.12
Placental cancer	5	1236	0.28	0.12–0.64 <sup>b</sup>
CNS cancer	17	1838	1.17	0.71–1.94
Malignant melanoma	37	3654	1.06	0.76–1.48
Thyroid cancer	10	943	1.16	0.55–2.13 <sup>b</sup>
Colon cancer	11	1125	1.17	0.58–2.08 <sup>b</sup>
Other cancer	54	9349	0.79	0.60–1.04
All except ovarian cancer	389	65 233	0.70	0.63–0.78

<sup>a</sup>Odds ratio (OR) with 95% confidence interval (95% CI) after adjustment for year of delivery, maternal age at delivery and smoking. Number of women who underwent IVF = 23 192, the total number of women = 1 365 179.

<sup>b</sup>Relative risk (RR) calculated as observed over expected numbers, the latter estimated after adjustment as stated above.

## Malignancies among women who gave birth after *in vitro* fertilization

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# CANCER DU SEIN ET FIV

- Etude rassurante pour femmes débutant FIV a partir de 30 ans
- Surveillance accrue pour femmes entre 20 et 25 ans ?
- Connaitre ATCD familiaux

conclusions

represent a level 2a evidence, and a prospective study that can carefully capture all the relevant factors will help to generate a solid answer to this important question.

Collège de Gynécologie CVL

# Conclusions

- Toute patiente candidate à une stimulation doit bénéficier d'un bilan gynécologique et sénologique complet.
- D'un interrogatoire sur ses ATCD personnels et familiaux.
- A ne pas négliger avec les années de suivi.

# Conclusions

- Nous devons être concernés
- Par les risques de cancer chez nos patientes infertiles
- Par des risques surajoutés par la FIV
- A court terme
- A long terme
- Information nécessaire ( nombre de tentatives ?)
- Obligation de succès / pas de cycles inutiles
- Registres, études et suivi indispensables .