

Kisspeptin role in functional hypothalamic amenorrhea

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Fertility, which is a natural capability for having offspring. It is well known, that women's fertility is strictly dependent on individual's age and that fertility peak occurs in the early 20s and decrease considerably after 35 years old

In modern societies, due to motherhood postponing, the problem of late reproduction is growing. It is important to characterize the possible causes of decreasing fertility with women's age and to describe available methods to assess it. Among known causes of decreased fertility in older women, the oocyte-dependent factors seems to be of highest importance. It has been clearly shown in studies analyzing the artificial reproduction techniques results, which shows that the oocyte age, in donor programs, has the greatest importance for the treatment outcome. Other factors, such as uterus depended causes are also important, especially for the course of pregnancy in older women. Because oocyte is the main limiting factor for fecundity in late reproductive age, therefore biochemical markers linked directly to ovarian follicles seems to be best indicators of reproductive potential. At present, the Anti-Müllerian hormone (AMH) synthesized by granulosa cells of growing follicles is considered as one of them. AMH serum levels correlate with number of antral follicles, the results of ovarian stimulation, live birth rate and the onset of menopause. Another biochemical marker being used for predicting response to ovulation induction is inhibin B. On the other hand these markers are still not as reliable as it is desired therefore physician should counsel each patient as individual and keep them aware about decreasing fertility with age. Fertility in women of late reproductive age is essential problem in contemporary gynecological endocrinology.

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