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Pilot Study: Reducing IVF Failure Rates with a Manual Physical Therapy Technique*

*** Wurn Technique[®], patent pending**

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Abstract

Objective: To assess the effectiveness of a site-specific manual soft-tissue therapy in improving in vitro fertilization (IVF) pregnancy rates in women who failed to become pregnant via two or more prior IVF embryo transfers.

Design and Intervention: Based on a previous study in which clinical pregnancies were documented in 19 of 25 (76%) women who underwent IVF following a specific manual therapy, a data subset of 7 patients was selected for further analysis. These 7 patients met the additional criterion of failure to ever become pregnant via (2 or more) IVF embryo transfers, prior to therapy. Treatments were designed to improve biomechanical function of the reproductive organs and adjacent structures by restoring visceral, osseous, and soft-tissue mobility.

Main Outcome Measure: Clinical pregnancy on the first post-treatment IVF embryo transfer.

Results: Of this subset of "challenging" patients (median age, 35.1), clinical pregnancies were documented in 5 of 7 women vs. the US Centers for Disease Control and Prevention (CDC) age-adjusted estimate of 2.1. The estimated odds ratio for a successful pregnancy in a cycle (manual treatment vs. no treatment) is 5.8 ($P = .025$, 2-sided).

Conclusions: Since 71.4% of these previously unsuccessful patients became pregnant on their first post-treatment IVF and 57% had full-term births, it appears that this nonsurgical, noninvasive manual soft-tissue therapy facilitates fertility in "challenging" IVF patients. With no risks and few, if any, complications or adverse effects, it should be considered as an adjunct to current infertility treatments.