

PATIENT INFORMATION

Aspirin

Adjuvant therapy

What is adjuvant therapy?

Adjuvant therapy, also known as 'add-ons', adjunct, complementary or alternative therapies, are recognised as an addition to standard assisted reproductive treatment and may be recommended to you with the intention to increase your success during your fertility treatment. There are numerous options available to you when accessing adjuvant therapies, including but not limited to the technology in laboratories, medical procedures, prescribed medications, nutritional supplements, and traditional medicines such as Chinese medicine, including acupuncture.

At present, the effectiveness of many adjuvant therapies is unknown, with little to no evidence that they will increase the success of your treatment or improve live birth rates. However, your health care provider may recommend adjuvant therapy when considering your medical history and tailoring your treatment plan.

It is important to consider the effectiveness, risks and financial costs of adjuvant therapies.

What is aspirin and how it is normally used?

Aspirin (acetylsalicylic acid) is classified as a non-steroidal anti-inflammatory drug (NSAID). Aspirin is used to treat mild to moderate pain, fever, swollen and tender body tissues. Aspirin is also known for its antiplatelet effect, which reduces inflammation in the arteries and prevents blood clots from forming. Daily Low dose Aspirin (LDA) is often prescribed as a preventative measure for heart attacks and strokes.

Why is aspirin recommended, and will it increase the success of my treatment?

Your fertility specialist may recommend low dose aspirin to you if you have a history of embryo implantation failure, early pregnancy loss or anti-phospholipid syndrome. It is thought that a localised inflammatory response in the uterus, whether triggered by an embryo transfer procedure or occurring independently, may be a contributing factor to implantation failure and early pregnancy loss. The inflammatory response, activated by prostaglandins, can introduce the formation of clots and uterine contractions.

Aspirin's anti-inflammatory and antiplatelet effect is thought to reduce the localised inflammation in the uterus and decrease the risk of implantation failure and early pregnancy loss. However, there is low-quality research and evidence supporting the use of routine low dose aspirin; therefore, its use in artificial reproduction is uncertain.



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What are the common side effects?

Some common side effects can include:

- Diarrhoea
- Itching
- Pain or stiffness in joints
- Ringing in ears
- Trembling
- Fast, pounding heartbeat

Regarding any additional side effects or contraindications for Aspirin, please refer to the Consumer Medicine Information (CMI) sheet.

Please notify your fertility specialist if you:

- Are using other blood-thinning medications
- Have a history of gastrointestinal ulcers, bleeding, or gastritis
- Kidney failure or severe liver disease
- Asthma
- Bleeding or clotting disorders

Are there risks to using aspirin during pregnancy?

Aspirin is a Category C drug, meaning its pharmacological effects, have caused, or may be suspected of causing harmful effects on the human foetus or neonate without causing malformations. However, it is known that Aspirin does not cross the placenta. Please speak to your obstetrician about continuing Aspirin during pregnancy.

What are the costs?

Cost of Low Dose Aspirin (LDA): The cost of low dose aspirin will vary depending on the brand and pharmacy. A box of tablets could cost you anywhere between \$3 - \$20.

Is Low Dose Aspirin (LDA) included in the cost of my cycle?: Aspirin is an additional expense and is not included in the cost of your cycle.

The information provided above is intended for educational purposes only and should not be used as a substitute or replacement for medical advice received from a medical professional. It is important to discuss your individual circumstances and situation with your treating doctor.