

An Evaluation of Preimplantation Genetic Diagnosis Outcomes in Johannesburg, South Africa

Bianca Carzis, Tasha Wainstein, Lawrence Gobetz, Amanda Krause

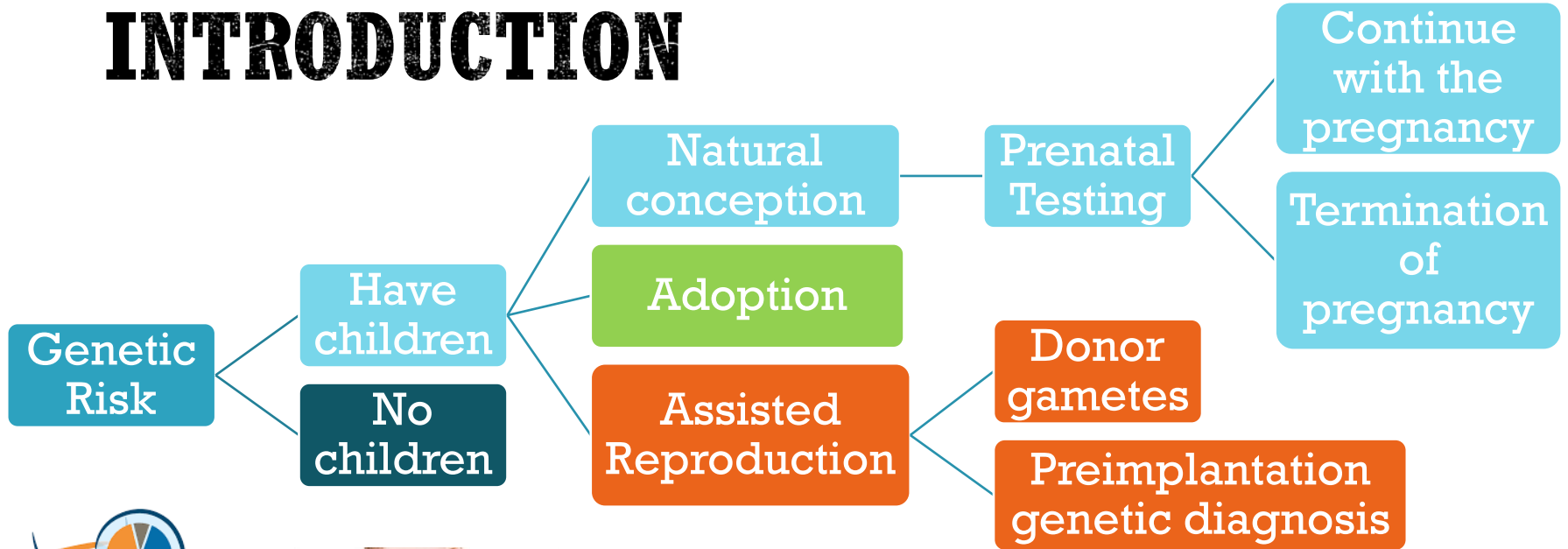


UNIVERSITY OF THE
WITWATERSRAND,
JOHANNESBURG

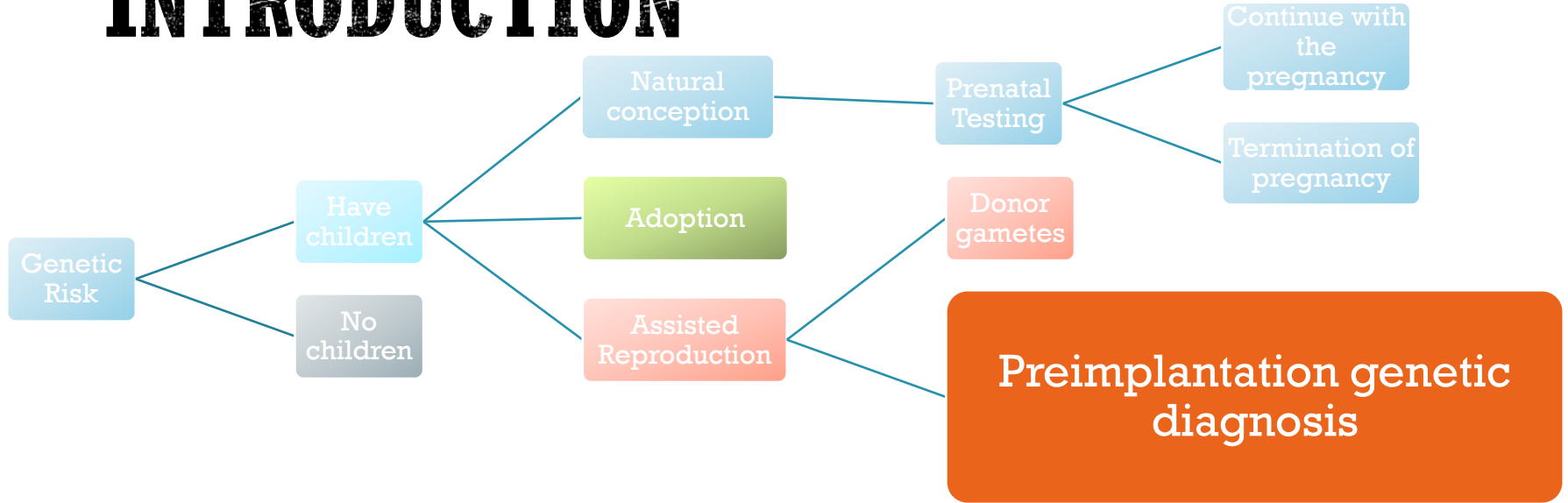


NATIONAL HEALTH
LABORATORY SERVICE

INTRODUCTION

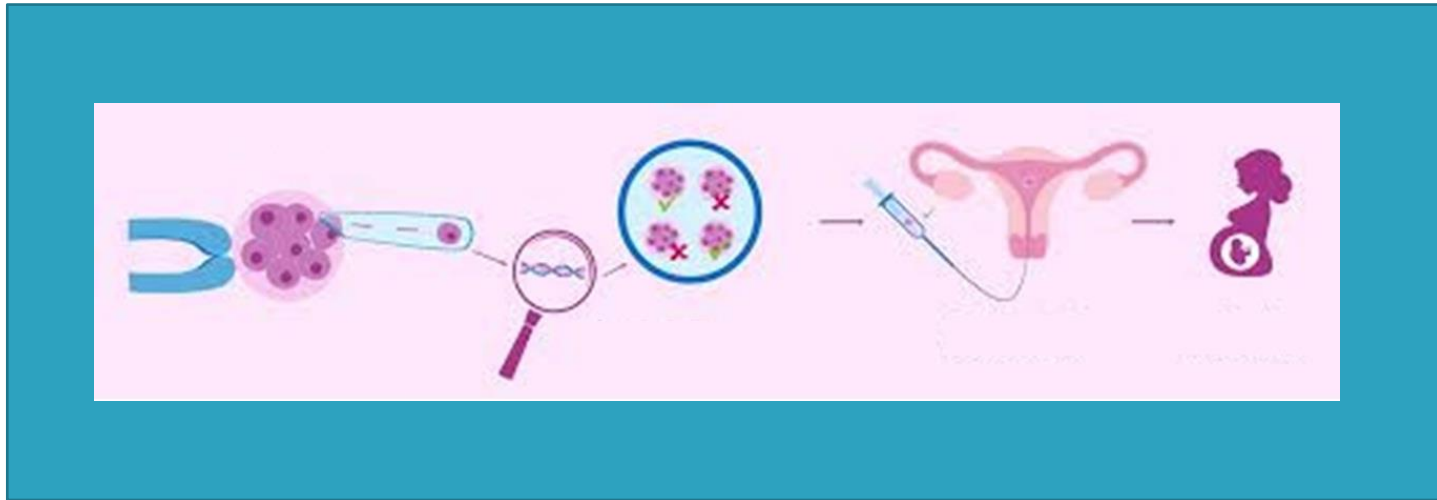


INTRODUCTION



INTRODUCTION

Preimplantation Genetic Diagnosis (PGD)



PGD IN SOUTH AFRICA

- 2006: First PGD case at the Division of Human Genetics (NHLS/Wits)
- No government-funded PGD initiatives
- 80% of SA population dependent on state healthcare
- No audit of this service has been done



PGD IN SOUTH AFRICA

What are the success rates?

How long does the process take?

How much does it cost?



AIMS AND OBJECTIVES

Aim

Conduct an audit of the PGD service at the Division of Human Genetics (NHLS/Wits) to provide accurate, local data to South African couples

Objectives

1. Assess the **outcomes** at various stages of the PGD process
2. Determine the **time** it takes couples to complete the process/withdraw
3. Conduct a **cost evaluation** of the PGD process



METHODS

Retrospective File Review

Genetic Counselling Files

- Demographics
- Family History
- Date of initial consultation
- Genetic condition
- Reasons for seeking PGD

Fertility Records

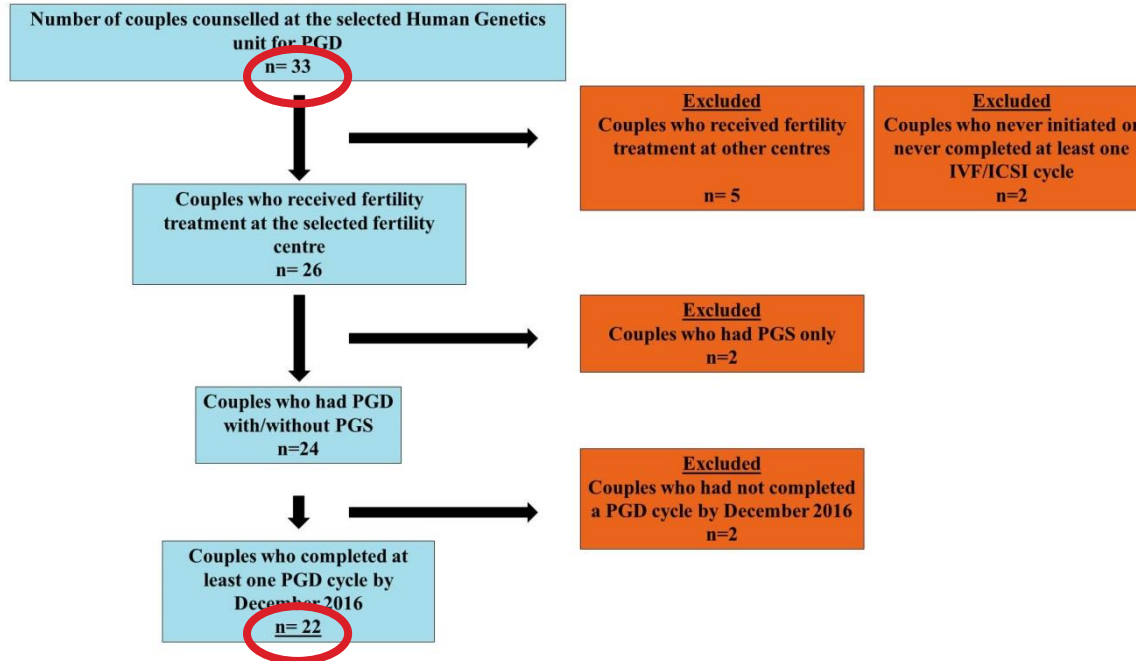
- No. of IVF/ICSI cycles
- No. of eggs retrieved
- No. of eggs fertilized
- No. of embryos biopsied
- No. of embryos transferred and implanted
- Pregnancy outcome
- Cost

PGD Records

- Genetic status of biopsied embryos
- Cost of PGD



METHODS



RESULTS AND DISCUSSION

The results from this study have not been published yet and are in the process of being published. The results have therefore been removed from this presentation.

For any questions or queries related to the results of this study, you can contact the presenter directly:

Bianca Carzis

Division of Human Genetics

National Health Laboratory Service/University of the Witwatersrand

[E]: bianca.carzis@nhls.ac.za

[T]: 011 489 9239



CONCLUSION

- PGD success rate is comparable to success rates achieved globally
- Lack government-funded initiatives
- Cost-benefit vs. other reproductive options or the cost of having an affected child
- Limitations: sample size, incomplete records
- Relevance to genetic counselling
- Future research: couples' experiences (qualitative)



ACKNOWLEDGMENTS

Division of Human Genetics NHLS/Wits:

- Ms Tasha Wainstein
- Prof Amanda Krause
- Dr Shelley Macaulay
- Ms Angela Turner

Vitalab:

- Dr Lawrence Gobetz
- Ms Lynn Frylinck
- Ms Calista Hardwick

Genesis Genetics:

- Dr Jaysen Knezovich (previously)

