

ARTIFICIAL SWEETENERS - DO THEY BEAR AN INFERTILITY RISK?

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Considering that the human fertility rate has declined over time, it could be argued that eating habits, including the consumption of sugar and artificial sweeteners, may negatively contribute to fertility potential. In fact, a positive association between the intake of artificially sweetened soft drinks and the risk of preterm delivery has been previously demonstrated in two epidemiological studies. To date, the association between the consumption of sweeteners and human assisted reproduction has never been investigated.

OBJECTIVE

To investigate if the oocyte quality and intracytoplasmic sperm injection (ICSI) outcomes are influenced by the consumption of soft drinks and coffee, sweetened with sugar or artificial sweeteners.

MATERIALS AND METHODS



INTRODUCTION

linear regression analyses were used to investigate the influence of dietary habits on:

- Embryo quality on days 2 and 3
- Blastocyst formation
- Clinical pregnancy rate

Variables	Values	
Injected oocytes	8.0 ± 6.3	
Fertilization rate	75.2 ± 25.1	
Embryos	6.8 ± 5.6	
High quality embryos	2.3 ± 3.2	
D2 (%)	1770/3192 (55.4)	
D3 (%)	1858/3192 (58.2)	
Blastocyst formation (%)	518/1136 (45.6)	
Embryos transferred	2.1 ± 1.0	
Non-transferred cycles (%)	36/524 (6.9)	
Clinical pregnancy rate (%)	155/488 (31.8)	
Implantation rate (%)	231/1025 (22.5)	
Miscarriage rate (%)	26/155 (16.8)	

Variables Regular soft drir Diet soft drink nsweetened Coffee with suga Coffee with artif sweetener ICSI laboratory outcomes. Varia Regu Diet so Unsw Coffee Coffee

sweet

Table 1. ICSI outcomes

CONCLUSION

The consumption of soft drinks and artificial sweeteners, but not coffee, negatively affects oocyte quality and ICSI outcomes. The general population believes that artificial sweeteners are healthier than regular sugar, and is not aware of the dangers hidden behind the promise of reduced calorie food and beverages. Patients should be advised about the adverse effect of sugar and mainly artificial sweeteners on the success of assisted reproduction.

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	Oocyte quality	Embryo quality on D2	Embryo quality on D3	Blastocyst formation
k	aOR: 0.61 CI: 0.50- 0.82 p= 0.032	aOR: 0.57 CI: 0.19-1.74 p= 0.320	aOR: 0.57 CI: 0.27-1.17 p= 0.124	aOR: 1.06 CI: 0.50-2.22 p=0.882
	aOR: 0.47 CI:0.33-0.58 p= 0.026	aOR= 0.67 CI= 0.56-0.85 p= 0.035	aOR= 0.69 CI= 0.52-0.94 p= 0.039	aOR: 0.82 CI: 0.65-1.03 p= 0.090
ffee	aOR: 1.03 CI:0.35-3.03 p=0.951	aOR: 0.82 CI: 0.28-2.41 p= 0.713	aOR: 1.00 CI: 0.34-2.93 p> 0.999	aOR: 0.71 CI: 0.26-1.94 p= 0.499
r	aOR: 0.89 CI: 0.77- 0.94 p= 0.049	aOR: 0.64 CI: 0.31-1.32 p= 0.222	aOR: 0.74 CI: 0.36-1.52 p= 0.409	aOR: 0.99 CI: 0.79-1.25 p= 0.954
cial	aOR: 0.51 CI: 0.25- 0.76 p= 0.028	aOR= 0.68 CI= 0.54-0.88 p= 0.033	aOR= 0.68 CI= 0.59-0.95 p= 0.035	aOR: 0.83 CI: 0.65-1.05 p= 0.113

Table 2. Binary and liner regression analyses' results for the association between the consumption of soft drinks and coffee, and

oles	Implantation	Clinical pregnancy	Miscarriage
	RC: 5.356	aOR: 0.95	aOR: 0.79
ar soft drink	r ² : 0.3%	Cl: 0.59-1.54	CI: 0.34-1.85
	p= 0.239	p= 0.843	p=0.590
	RC: -0.898	aOR= 0.91	aOR: 1.31
oft drink	r ² :3.5%	Cl= 0.87-1.01	CI: 0.26-6.64
	p= 0.063	p= 0.065	p= 0.742
	RC: 2.881	aOR: 1.01	aOR: 0.87
eetened coffee	r ² : 0.1%	Cl: 0.62-1.63	CI: 0.18-4.34
	p= 0.525	p= 0.972	p= 0.870
	RC: 3.389	aOR: 1.05	aOR: 0.64
e with sugar	r ² : 0.1	Cl: 0.65-1.70	CI: 0.27-1.49
	p= 0.461	p= 0.847	p=0.296
with artificial	RC:-0.911	aOR= 0.93	aOR: 1.08
anor	r ² :4.8%	Cl= 0.81-1.02	CI:0.46-2.51
	p= 0.058	p= 0.067	p= 0.859

Table 3. Binary and liner regression analyses' results for the association between the consumption of soft drinks and coffee, and ICSI clinical outcomes