Test: Decidual Score test

PRINCIPLE
Molecular testing of endometrial biopsy samples for women with reproductive failures is important for evaluation of uterine receptivity and for a personalized therapeutic strategy [1, 2]. The test is based on molecular analysis of six factors that are associated and essential for decidualization: FOXO1, GZMB, IL15, SCNN1A, SGK1 and SLC2A1 [3-7]. The Decidualization score reflects how many of these factors are expressed at normal range in the tested sample. The Normal Decidualization score is “>4”. The score “4” is Borderline Normal. The score “<4” is Low Decidualization score. This test (Decidualization Score test) helps to determine if the molecular profile in endometrium is implantation-friendly and could be used for selecting patients that require therapeutic actions to improve endometrial condition before IVF–ET procedure.

SPECIMEN REQUIREMENTS: endometrial biopsy sample obtained according to a standard procedure with a Pipelle catheter or similar. Natural cycle: take the biopsy 7 to 9 days after the LH surge. The day of the LH surge is considered as LH+0, and the biopsy will be taken at LH+7-9. The best way to identify the LH surge is with the urinary LH tests. Hormone Replacement Therapy cycle: upon initiation of an HRT cycle, take the biopsy after 5 full days of progesterone treatment. The day for the first intake of progesterone is considered as P+0 and the day of the biopsy is P+5. Specimen should be collected into a tube with 3ml of RNA stabilization solution (provided by the Laboratory) and shipped to the Laboratory at ambient temperature. Specimen stability in RNA stabilization solution: room temperature – 1 week, refrigerated – 1 month.

METHODODOLOGY: Targeted RNAseq via Next-Generation Sequencing (NGS).

TURNAROUND TIME: 7-10 business days

REFERENCES: