



VIDAS[®] ANTI-MÜLLERIAN HORMONE

On-hand testing for greater patient comfort



PIONEERING DIAGNOSTICS

Did you know?



1/6 couples worldwide experience some form of infertility ⁽¹⁾



Polycystic Ovary Syndrome (PCOS) affects **5-10%** of women of reproductive age ⁽²⁾

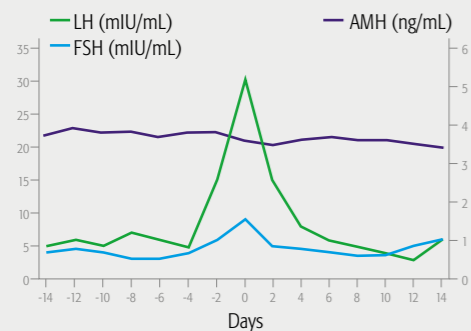


In 30 years, **the success rate of IVF** has increased from 10% to **above 30%** ⁽³⁾

Anti-Müllerian Hormone (AMH) testing for ovarian function assessment in women

AMH FEATURES

Stable over the menstrual cycle



Circulatory patterns of FSH, LH and AMH during the menstrual cycle of young healthy women (4) Day 0 = day of LH surge

Sensitive to conformational change in samples ⁽⁵⁾

More accurate than Antral Follicular Count (AFC)

- Inter-operator variation makes AFC subjective
- AMH provides quantitative objective results ⁽⁶⁾

A key test within the diagnostic work-up

VIDAS® Anti-Müllerian Hormone

On-hand testing for greater patient comfort

Reliability and robustness

Greater reliability through patented proprietary raw materials

- Reliable results when compared with an existing automated method*
- **Minimal impact of pre-analytical stage on test results:**

≤ 8 hours at +18/+25°C
in closed primary tube

≤ 8 hours



≤ 5 days at +2/+8°C
when aliquoted

≤ 5 days



≤ 3 freezing-thawing cycles

≤ 3 cycles



VIDAS®: an easy-to-use benchtop platform

- Just load & go
- Limited calibration and maintenance
- Compact instrument: easily fits into your fertility center or laboratory

VIDAS® COMMUNITY:
partnering over
30 000 users
worldwide

24/7 availability for your patients' comfort

CLINICAL APPLICATIONS

As an indicator of the ovarian follicle reserve, AMH is useful in different contexts all along the reproductive lifespan:

Personalization of infertility management (IVF/ART):

Assessment of ovarian reserve for infertility investigations

Help to select the best stimulation protocol

- Adapt treatment
- Avoid unnecessary stimulation
- Reduce risk of hyperstimulation syndrome

Detection of ovarian dysfunction (PCOS, Premature ovarian failure...):

The use of AMH rather than Follicle Stimulating Hormone (FSH) or Luteinizing Hormone (LH) provides direct, more accurate assessment of ovulation.

Monitoring of ovarian damage (surgery, gonadotoxic therapies)

First-choice marker to detect the decline of the ovarian reserve.

A COMPLETE SOLUTION ON YOUR VIDAS® INSTRUMENT

HORMONE ASSAYS

- AMH
- ESTRADIOL
- FSH
- LH
- HCG
- PROLACTIN
- PROGESTERONE
- TESTOSTERONE
- THYROID PANEL

SEROLOGY PANELS

- HEPATITIS
- HIV
- TORC

1 patient = 1 test for maximum flexibility

- On-demand testing
- **Results during the consultation**
 - Less patient stress
 - Immediate integration of AMH results into the full diagnostic work-up
 - Treatment optimization
 - No unnecessary ovarian stimulation

* See package insert

AVAILABLE ON
VIDAS® INSTRUMENTS
VIDAS®, MINI VIDAS®
AND VIDAS® 3



VIDAS® offers your lab simplicity and productivity. It will enhance your workflow, thanks to its six independent compartments.

	VIDAS® AMH
Reference number	417011
Tests / kit	30
Time to result	35 min
Sample type	Serum, Plasma (Li Hep)
Sample volume	200 µL
Units	ng/mL - pmol/L
Measuring range	0.02 – 9.00 ng/mL
Calibrators & Controls frequency	28 days

VIDAS® AMH is not available in the following countries, states and regions: Armenia, Australia, Austria, Azerbaijan, Belarus, Belgium, Canada, Denmark, France, Germany, Hong-Kong, Ireland, Israel, Italy, Japan, Kazakhstan, Kyrgyzstan, Lichtenstein, Moldavia, New Zealand, Portugal, Russia, Spain, Switzerland, Tajikistan, The Netherlands, Turkey, Turkmenistan, United Kingdom.

VIDAS® AMH may not be available in your country.

Please contact your local bioMérieux representative for further information.

REFERENCES

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2. <https://www.pcosfoundation.org/>
3. https://www.sart.org/History_of_IVF/
4. La Marca et al Human Reproduction 2006
5. Rustamov O et al Human Reproduction 2012
6. Anderson RA et al Fertility and Sterility 2015