## **OVARIAN HYPERSTIMULATION SYNDROME**

Dear Sir,

I read the recent publication on ovarian hyperstimulation syndrome (OHSS) with great interest.<sup>(1)</sup> Rajesh et al concluded that "gonadotropin doses at stimulation should start at 150 iu or less in women below 35 years of age, with a step-up of 37.5 iu, as necessary.<sup>(1)</sup>" There are some points to note about this research. First, as a retrospective study, it might not be possible to control the confounding factors as well as the quality of all laboratory analyses. Second, it is interesting to compare the results of this study with a recent publication that documented the use of bromocriptine.<sup>(2)</sup> It is reported that "bromocriptine reduced the incidence and severity of clinically significant OHSS in high-risk patients without affecting the pregnancy rates.<sup>(2)</sup>"

Yours sincerely,

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## REFERENCES

- 1. Rajesh H, Lee WY, Fook-Chong S, Yu SL. Ovarian hyperstimulation syndrome: an analysis of patient characteristics in the Asian population. Singapore Med J 2011; 52:168-74.
- Sherwal V, Malik S, Bhatia V. Effect of bromocriptine on the severity of ovarian hyperstimulation syndrome and outcome in high responders undergoing assisted reproduction. J Hum Reprod Sci 2010; 3:85-90.