Study: Mercier Therapy Improves IVF Outcomes

Category: Manual/Osteopathic/Chiropractic Techniques **Author:** Merciér, J., LMT, Midwife, ND, PhD Merciér Therapy, Saint Charles, Illinois, USA

Introduction

Infertility remains a significant health concern among women, particularly in the reproductive age group of 15–44 years. According to the CDC, 12.1% of women in this age group experience impaired fecundity, and 6.7% of married women are considered infertile. Additionally, 12% (7.3 million) have used infertility services, including Assisted Reproductive Technology (ART) like in-vitro fertilization (IVF).

The use of ART has been growing steadily, with 263,577 ART cycles performed in the U.S. in 2016. Of these, 197,737 were aimed at achieving pregnancy, resulting in 65,996 live births . Despite advances in reproductive technology, success rates remain relatively low, especially after a first IVF cycle, which averages a 30.7% pregnancy rate for women up to age 42 using their own fresh eggs.

This growing reliance on medical interventions for conception raises important questions about the role of adjunctive therapies that could improve IVF success rates. Merciér Therapy, a site-specific deep pelvic organ visceral manipulation technique, has shown promise in preparing the body for optimal reproductive function. This study evaluates whether Merciér Therapy can enhance IVF outcomes by improving pelvic organ mobility, blood flow, and overall organ function.

Purpose/Aim

The aim of this five-year study was to assess the effectiveness of Merciér Therapy as a preparatory intervention for women undergoing IVF stimulation. Specifically, the study sought to determine if deep pelvic organ visceral manipulation could improve cycle optimization and increase the likelihood of pregnancy following IVF.

Materials and Methods

Between 2013 and 2018, 171 women, aged 27–42, were enrolled in the study. All participants experienced primary or secondary fertility challenges and were preparing to undergo IVF. Women were selected regardless of age, medical condition, prior surgical interventions, or treatment history, including those with no prior fertility treatments.

Participants underwent six hours of Merciér Therapy, divided into sessions aimed at improving pelvic organ mobility and function through deep visceral manipulation. This therapy was applied in a relaxing, holistic clinical setting in Illinois. In addition, participants were provided with organic food-based prenatal vitamins containing methylated folate to support overall reproductive health.

Each woman's response to Merciér Therapy was tracked, and their pregnancy outcomes were recorded following one or more IVF cycles. A subgroup of participants who conceived naturally following Merciér Therapy was also noted.

Results

Of the 171 women who participated in the study, 150 (87.7%) achieved pregnancy after receiving Merciér Therapy, either through IVF or natural conception:

- 142 women (83%) conceived through IVF:
 - o 87 women (50.9%) achieved pregnancy after their first IVF cycle.
 - 44 women (25.7%) conceived after a second IVF cycle.
 - 11 women (6.4%) achieved pregnancy after a third IVF cycle.
- **8 women (4.7%) conceived naturally** after completing Merciér Therapy without requiring IVF.

A total of **21 women (12.3%)** did not achieve pregnancy during the study period.

Relevance

This study highlights the potential of Merciér Therapy as an effective preparatory treatment for women undergoing IVF. By focusing on deep pelvic organ manipulation, Merciér Therapy may increase blood flow, organ mobility, and functionality, all of which are crucial for successful reproductive outcomes.

Moreover, the results suggest that Merciér Therapy can significantly improve the success rates of IVF, especially during the first cycle. Half of the participants (50.9%) conceived after their initial IVF attempt, a marked improvement compared to national averages reported by the CDC and other reproductive health organizations.

Conclusions

Merciér Therapy appears to be a valuable complementary therapy for women undergoing IVF. The therapy's ability to enhance pelvic organ mobility and blood flow likely contributes to more favorable conditions for conception, resulting in higher pregnancy rates. The fact that nearly 88% of participants achieved pregnancy, either through IVF or naturally, underscores the efficacy of this non-invasive, manual therapy.

The significant improvement in first-cycle IVF success rates also suggests that Merciér Therapy can shorten the overall duration of fertility treatments, reduce the need for multiple IVF cycles, and lower the emotional and financial burdens often associated with ART.

Discussion

This study's findings align with prior anecdotal evidence suggesting that soft tissue manipulation of the pelvis can improve reproductive outcomes. By directly addressing the underlying biomechanical and circulatory issues that may impair fertility, Merciér Therapy offers a holistic alternative or complement to traditional IVF protocols.

The pregnancy success rate in this study (87.7%) far exceeds the average ART success rate of 30.7% for women up to age 42 reported by the Society for Assisted Reproductive Technologies (SART). This

stark contrast supports the idea that Merciér Therapy could significantly enhance the effectiveness of medical fertility treatments. Additionally, the 4.7% of participants who conceived naturally without IVF indicates that Merciér Therapy alone may resolve certain reproductive challenges without medical intervention.

Implications

The results of this study suggest that Merciér Therapy could become an integral part of fertility treatment plans, particularly for women preparing for IVF. By enhancing pelvic organ function and addressing the root causes of impaired fertility, this therapy offers a gentle and non-invasive approach to improving conception rates.

Future research could further explore Merciér Therapy's role in treating specific reproductive conditions, such as endometriosis or polycystic ovary syndrome (PCOS), as well as its long-term impact on fertility health beyond conception.

Keywords

Conception, infertility, Merciér Therapy, in-vitro fertilization, pregnancy, pelvic manipulation

References:

- 1. Centers for Disease Control and Prevention. National Center for Health Statistics: Infertility. [Link to CDC Website]
- 2. Society for Assisted Reproductive Technologies (SART). ART National Summary Report. [Link to SART Data]