

# Reference ranges of AMH in early pregnancy: the Generation R Study, a population-based prospective cohort study

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## Abstract

**Objective:** The objective of this study is to establish maternal reference values of AMH in a fertile multi-ethnic urban pregnant population and to evaluate the effect of gestational age. **Design:** The Generation R Study is an ongoing population-based prospective cohort study from early pregnancy onwards. **Setting:** Rotterdam, the Netherlands, out of hospital setting. **Population:** In 5806 women serum AMH levels were determined in early pregnancy (median 13.5 weeks; 95% range 10.5-17.2). **Methods:** The model-based AMH reference ranges for maternal age and gestational age were created using GAMLSS. Associations between AMH and several first trimester biomarkers were analyzed using multivariate linear regression analyses. **Main outcome measures:** AMH levels in early pregnancy and the association with placental biomarkers, hCG, sFLT, and PLGF. **Results:** A nomogram of AMH in early pregnancy was developed. Serum AMH levels showed a decline with advancing gestational age. Higher AMH levels were associated with a higher level of hCG and sFLT. This last association was predominantly mediated by hCG. AMH levels were negatively associated with PLGF levels. **Conclusion:** In this large study we show that AMH levels in the first trimester decrease with advancing gestational age. The association between AMH and the placental biomarkers hCG, sFLT and PLGF suggests a better placental development with a lower vascular resistance in mothers with higher AMH levels. AMH might be useful in predicting adverse pregnancy outcome due to impaired placental development. **Keywords:** Ovarian reserve, placental biomarker, nomogram, first trimester, human Chorionadotrophin (hCG), soluble FMS-Like Tyrosine kinase-1 (sFLT), Placental Growth Factor (PLGF).

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