

The funding of my scientific visit to attend the 3-day COMMIT workshop at the University of Auckland in November 2018 was very much appreciated.

Participants in the workshop were the steering group for the COMMIT initiative, clinicians, researchers, representatives for patient organisations, chief editors from the two main fertility research journals (*Fertility and Sterility* and *Human Reproduction*), and other stakeholders.

COMMIT (Core Outcome Measures for Infertility Trials) is an initiative that has developed over a few years. The aim is to overcome the barrier of trials using and reporting different outcomes, by developing a common set of outcomes that all researchers testing new treatments for infertility can use. The preparations have included a three round questionnaire in which different outcome measures have been tested among clinicians, researchers, patients, and other stakeholders. The process has been described in a publication in *Human Reproduction Open* during 2018 (Duffy et al., A protocol developing, disseminating and implementing a core outcome set for infertility. *HROpen* pp1-6, 2018).

Day 1 was devoted to developing a core outcome set for in vitro fertilisation research (COMMIT-IVF). The third Delphi survey results were presented and discussed. We had an intense discussion of outcomes classified as unsure after which the core outcomes were finalised.

Day 2 was devoted to priority setting of research questions. In a selection process from several thousands of research suggestions, the most feasible, appropriate and frequently suggested topics had been prepared. In four different areas (Male factor infertility, Assisted reproductive technologies, Female factor infertility, and Ethics, access, and organisation of care), the top ten research questions were prioritized.

Day 3 was devoted to standardising core outcome definitions and data reporting. There were three consecutive sessions on standardising definitions including the following outcomes:

Viable pregnancy confirmed by ultrasound

Viable multiple pregnancy confirmed by ultrasound

Pregnancy loss (ectopic pregnancy, miscarriage, stillbirth, pregnancy of unknown location, termination of pregnancy)

Live birth

Gestational age at delivery

Birth weight

Neonatal mortality

Major congenital abnormalities

We discussed a publication plan for COMMIT. The steering group, including myself, will work on a paper presenting the final core outcome set.

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