

This month's Fertility Circle Newsletter is about **FERTILITY PRESERVATION**. There are two categories: for a **medical** condition, including pre-cancer treatment or early menopause; and **social**, for egg or sperm freezing to use at some point in the future, when the time feels right to start a family. NHS funding is available for medical fertility preservation but not for social fertility preservation.

Social egg or sperm freezing can offer opportunities for making informed choices about future fertility options, for either personal or professional reasons. Ovarian reserve and egg quality declines with age and the ideal time to freeze eggs is when you're in your 20s or early 30s: the younger you have your eggs frozen, the greater your chance of success. The 10 year limit for how long you can freeze eggs was recently extended to 12 years, to take into account the delays to fertility treatment because of the Covid pandemic.

Who might be thinking about fertility preservation?

Working from home: the past year has seen a lot of companies adopt digital initiatives a lot quicker than they had perhaps intended, opening-up possibilities for working from home rather than being office-based. This new work/life balance presents an opportunity for work patterns to fit around family life.

Social egg freezing may offer an opportunity for conditions such as endometriosis or a history of uterine fibroids, although you should consider that you might need more than one cycle of egg collection to harvest enough eggs for future fertility treatment to be viable. (This is also why treatment with **donated eggs** depends on the age of the egg donor and less on age when receiving treatment with donated eggs.) Going through this process can be challenging and CARE's Buddy Support programme can help give that extra support.

For more information about the process of egg freezing <u>click here</u>, watch a <u>video by our Group Director of Embryology</u>, <u>Alison Campbell</u> or book an appointment for a consultation with our patient enquiry team on **0800 564 2270**.

Embryo freezing can also be an option to consider; this is where eggs are collected, fertilised with sperm (either from the partner or from a sperm donor) with IVF and freezing the best quality embryos. This process can involve taking drugs to stimulate the ovaries before egg collection so that enough eggs are collected; more than one stimulated treatment cycle might be needed to achieve this.

Social sperm freezing can be an option if you're considering a vasectomy, or if there's a concern about the quality of sperm deteriorating; Rhod Gilbert's recent myth-busting documentary Stand Up to Infertility quoted male infertility accounting for roughly half of all infertility cases. Although there's no equivalent to a menopause, sperm quantity and quality <u>does</u> decline with age, which can affect success in fertility treatments. While there is a potential for not all the sperm surviving the freezing and thawing process, there are no increased risks to either the patient or to babies born using frozen sperm.

CARE Fertility regularly holds <u>male-focussed online support events</u> - our next event is scheduled for May 24th at 7 pm - you can ask questions and chat or choose to be anonymous, speaking with the camera off, or just listening.

Education about fertility is also important: The Fertility Education Initiative is a programme of work dedicated to improving knowledge of fertility and reproductive health in the UK. Their website includes a film aimed at young people to make them aware of factors that could lead to infertility later in life. The film carries the message that the main thing that affects fertility is age, as well as unhealthy lifestyles that can affect both male and female fertility.

LGBTQ+: Freezing eggs or sperm is also an option for the LGBTQ+ community. Lesbian and bisexual women can have the same infertility problems as heterosexual women. Gay couples can consider freezing their sperm for when they're ready to have a baby using surrogacy. Trans men and Trans women can consider preserving their future fertility before hormone therapy or surgery to give them the opportunity of being part of a child's genetic make-up at some point in the future (a referral to an NHS Gender Identity clinic can help with considering this as an option with NHS funding).

A good next step to help with making an informed choice about fertility preservation is to have a <u>fertility assessment</u>. For egg freezing, this would include getting a detailed scan with antral follicle count as well as an AMH (Anti-Mullerian Hormone) blood test to assess ovarian reserve to check if there's a good ovarian reserve to make egg freezing a realistic option. For sperm freezing, having a semen analysis will check whether there are any problems that might need addressing such as lifestyle, caffeine and alcohol intake, as these can affect sperm quality. For gay men, it's a good idea for both partners to think about having a semen analysis as the results could indicate whether one partner might be a better candidate to provide sperm for surrogacy treatment.

I hope this month's Newsletter has given some helpful information about the topic of fertility preservation and whether it's something to think about; it's important everyone knows what their options are for when they feel ready to start a family.

With best wishes,

Rachel Saunders
Clinic Director, CARE Tunbridge Wells

VIDEO: Alison Campbell - Egg Freezing, 10 things you need to know

OTHER LINKS:

IVF Support Events | CARE Fertility

<u>Fertility Preservation | Fertility Network (fertilitynetworkuk.org)</u>

<u>Fertility Education Initiative (FEI) launches video aimed at young people - Faculty of Sexual and Reproductive Healthcare (fsrh.org)</u>

Egg freezing | Human Fertilisation and Embryology Authority (hfea.gov.uk)
Sperm freezing | Human Fertilisation and Embryology Authority (hfea.gov.uk)

Male Infertility Support and Statistics | HIMfertility Rhod Gilbert Time to Talk Tackle

https://www.mysurrogacyjourney.com